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C.D.C. Vaccine Advisers May Limit Hepatitis B Shots for Newborns

Committee members, some of whom are vaccine skeptics, are likely to recommend restricting the use of the shots at birth or delaying them until later in childhood.



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When the federal committee that recommends vaccine policies meets on Thursday, one vaccine on the agenda will be the hepatitis B shot, a longtime target of Health Secretary Robert F. Kennedy Jr.

The committee members are widely expected to revise the longstanding recommendation to immunize all newborns against hepatitis B, a highly contagious viral disease that can severely damage the liver.

Instead, they may endorse immunizing only babies born to women who are known to be infected or delaying the first dose until later in childhood.

The vaccine is credited by public health experts with nearly eliminating maternal transmission of the disease in the United States.

"The risk of missing a case of hepatitis B is so significant that I just can't imagine why we would delay a vaccine that is proven to be helpful and efficacious," said Dr. Brenna Hughes, a member of the working group on vaccines at the American

College of Obstetricians and Gynecologists.

Mr. Kennedy has questioned the vaccine's safety and claimed, incorrectly, that it was not tested properly. In his confirmation hearing in January, he refused to say that the hepatitis B vaccine does not cause autism, a widely accepted fact among mainstream scientists.

He later claimed on "The Tucker Carlson Show" that officials at the Centers for Disease Control and Prevention had hidden data showing that the vaccine caused autism.

Several members of the vaccine panel, called the Advisory Committee on Immunization Practices, have also made comments suggesting that vaccination for hepatitis B at birth may be misguided.

"Unless the mother is hepatitis-B-positive, an argument could be made to delay the vaccine for this infection," Martin Kulldorff, the committee's chair, said at its previous meeting in June.

Vaccine experts at the C.D.C., who normally would be deeply involved in preparing for this week's meeting, have been sidelined and given no more information than the public about the meeting's agenda or possible outcomes.

Chronic cases of hepatitis B can lead to cirrhosis, liver failure and liver cancer. Although many infections are acquired through sexual contact or from needles, including in drug use, tattoos and piercings, the virus also can be spread by household objects like toothbrushes, razors or combs that are used by an infected person.

Much of the controversy over the shots centers on the timing of the first dose, which is currently given to all babies within 24 hours of birth. A second dose is administered at 1 to 2 months of age, and a third between 4 and 6 months.

Mr. Kennedy and his allies have argued that hepatitis B is transmitted through sexual contact or sharing needles, and therefore children do not need protection against it. They have proposed instead that women be tested for hepatitis B during

pregnancy, and that only the babies of infected women be immunized at birth.

Lawmakers have also become embroiled in the debate. Senator Rand Paul, Republican of Kentucky and a physician, said incorrectly in a social media post that "all mothers who deliver in a hospital are tested," so there was no reason to immunize newborns.

That prompted Senator Bill Cassidy, Republican of Louisiana and also a doctor, to respond, saying, "Empirically, this is not true." Two days later, Mr. Cassidy posted graphic images of hepatitis B cases, saying, "People who object to hepatitis B vaccination apparently have never treated patients like this."

Some states are already preparing for the possibility of the vaccine's removal from the childhood immunization schedule.

"While we hope A.C.I.P. will issue evidence-based vaccine recommendations," Maura Healey, the governor of Massachusetts, said in a statement, "our state Department of Public Health will develop recommendations that are rooted in science and data in case the federal government continues to backtrack on its obligation to protect public health."

Before 1991, when newborns were not all vaccinated for hepatitis B, about 20,000 babies became infected each year. Routine immunization at birth cut the number of newborn infections by 68 percent within the first decade. There are now fewer than 20 children per year who acquire the disease from their mothers.

Only about half of the cases before 1991 were a result of transmission from an infected mother. The other half "weren't getting it from becoming sex workers, and they weren't getting it from being intravenous drug users," Dr. Paul Offit, director of the Vaccine Education Center at Children's Hospital of Philadelphia, said.

Instead, their infections were a result of other causes, including casual contacts like sharing toothbrushes or washcloths, Dr. Offit said.

Most adults recover fully from infections, but some remain chronically infected. More than half of the up to two million American adults who may have chronic hepatitis B do not know their status because they have mild or no symptoms.

The stakes are much higher for children: More than 90 percent of infants infected with the virus develop chronic hepatitis B, compared with less than 5 percent of people who are infected as adults.

Globally, 190 member states of the World Health Organization vaccinate against hepatitis B in infancy, and 117 of them administer the first dose within the first 24 hours of life.

But some nations, like Britain and Denmark, immunize babies at birth if the mother is known to be infected, and delay the first dose to 8-weeks-old for all others.

"For those health care systems, that seems to be a reasonable decision," Dr. Ofer Levy, director of the Precision Vaccines Program at Boston Children's Hospital, said, noting that those countries offer nationalized health care.

But, he said, "the risk of families falling between the cracks of the health care system may be much higher in the U.S."

Dr. James Campbell, vice chair of the American Academy of Pediatrics infectious disease committee, said a risk-based approach also incorrectly presumed that all pregnant women sought medical care, disclosed if they had had unprotected sex or injected drugs and knew about all of their partners' sexual activity and drug use.

From 2015 to 2017, about 21,000 infants were born to pregnant women with hepatitis B antibodies, but fewer than half were identified through prenatal screening, according to the C.D.C.

Current recommendations also suggest that women be tested for syphilis twice during pregnancy and at the time of delivery. Yet nearly 4,000 babies were diagnosed with congenital syphilis in 2023, including 279 who were stillborn or died soon after birth.

It is also not practical to rely on testing women during delivery because the results may not be available quickly enough, Dr. Campbell said, or the test may not pick up an infection, especially in women who have been infected recently.

Mr. Kennedy has questioned the safety of the hepatitis B vaccine, saying that the aluminum-based salts added to the shot to boost the immune response are toxic to the brain.

A few studies have suggested that the salts can increase the risk of allergies or asthma, while many others have found no link. Dr. Levy said he welcomed more research, which could also help design even better vaccines.

But even if the shots slightly increase the risk of asthma, he said, "I'd rather have that than have my child get, for example, bacterial meningitis or something like that."

He added, "There's always room to keep studying this, but let's not throw the baby out with the bath water."

Apoorva Mandavilli reports on science and global health for The Times, with a focus on infectious diseases and pandemics and the public health agencies that try to manage them.