YOU VACCINATE THEM—

But will they complete the series for protection?

Help protect more adult patients faster with the only 2-dose, 1-month hep-B vaccine[1,3]

Fewer doses, higher completion rates, faster protection[1,2,4]*

NO ONE SHOULD GET HEP-B

*95.0% seroprotection rate for HEPLISAV-B compared to 81.3% for Engerix-B[1,2]

INDICATION

HEPLISAV-B is indicated for prevention of infection caused by all known subtypes of hepatitis B virus in adults 18 years of age and older.[1]

Please see Important Safety Information throughout and available full Prescribing Information.

If your patients don't complete the series,

THEY MAY NOT BE PROTECTED AGAINST HEPATITIS B, WHICH CAN HAVE LIFE-THREATENING CONSEQUENCES[5,6]

Chronic hepatitis B infection can lead to[6,7*]

- Cirrhosis
- Liver cancer
- Liver transplant
- Death

54% of liver cancer cases worldwide
are due to hepatitis B[8†]

Hepatitis B has no cure
Although treatments are available, the best way to prevent it is through vaccination[9]

In a real-world study,

Only 26% of patients completed the 3-dose series[4‡]

Don't leave patients unprotected

*For most adults, HBV clears on its own. But for those who don't clear the virus, it can progress to chronic hepatitis B and potentially life-threatening consequences such as liver cancer. From 2018–2023, there were an estimated 13,000–22,000 cases of acute hepatitis B annually in the US.[6,10]

†On average in the US, there are 42,000 new liver cancer cases and 30,000 deaths each year; not all cases are hepatitis B–related. Estimates for 2025 per the Surveillance, Epidemiology, and End Results Program (SEER) data set.[11]

‡This was a nested cohort study of 10,888 adult Kaiser Permanente Southern California (KPSC) members not receiving dialysis who received a first dose of the hepatitis B vaccine series in primary care settings. Patient data were captured from default electronic health record (EHR) order sets. Individuals were followed up through the EHRs for up to 1 year after the first dose to assess their receipt of subsequent doses of the 2-dose or 3-dose vaccines. Applies to the percentage of individuals who completed the series within the recommended schedule plus 3 months. Series completion within the recommended vaccine schedule plus 3 months (45% for the 2-dose vaccine and 26% for the 3-dose vaccine) was the primary outcome and series completion within 1 year (61% for the 2-dose vaccine and 32% for the 3-dose vaccine) after receipt of the first dose was the secondary outcome. Limitations: Results of this study may have limited generalizability in settings with greater proportions of underinsured or uninsured individuals or in the absence of electronic reminders for hepatitis B vaccination. Outcome misclassification could have occurred if hepatitis B vaccine doses were received outside of the KPSC system and not documented in the KPSC EHRs; this potential bias is likely minimal.[4]

YOU'RE MORE LIKELY TO PROTECT YOUR PATIENTS WITH 2-DOSE HEPLISAV-B[1,2,4§]

In a real-world study of >10k participants, a large health system evaluated the impact of simply switching to HEPLISAV-B and found....

~2x MORE

ADULTS COMPLETED THE 2-DOSE HEPLISAV-B SERIES[4‡]

than those starting with 3-dose Engerix-B

That means more of your patients could achieve protection[1,2]

In head-to-head clinical trials, **HEPLISAV-B provided faster and statistically significantly higher rates of protection in adults 18+** when compared to 3-dose Engerix-B

START HEPLISAV-B

For the **ONLY 2-dose** adult hepatitis B vaccine that can be completed in just **1 month**[1,3]

[§]Compared to 3-dose Engerix-B® [Hepatitis B Vaccine (Recombinant)][1,2,4]

INDICATION

HEPLISAV-B is indicated for prevention of infection caused by all known subtypes of hepatitis B virus in adults 18 years of age and older.

IMPORTANT SAFETY INFORMATION

Do not administer HEPLISAV-B to individuals with a history of severe allergic reaction (eg, anaphylaxis) after a previous dose of any hepatitis B vaccine or to any component of HEPLISAV-B, including yeast.

Please see Important Safety Information throughout and available full Prescribing Information.

2 DOSES. 1 MONTH.[1]

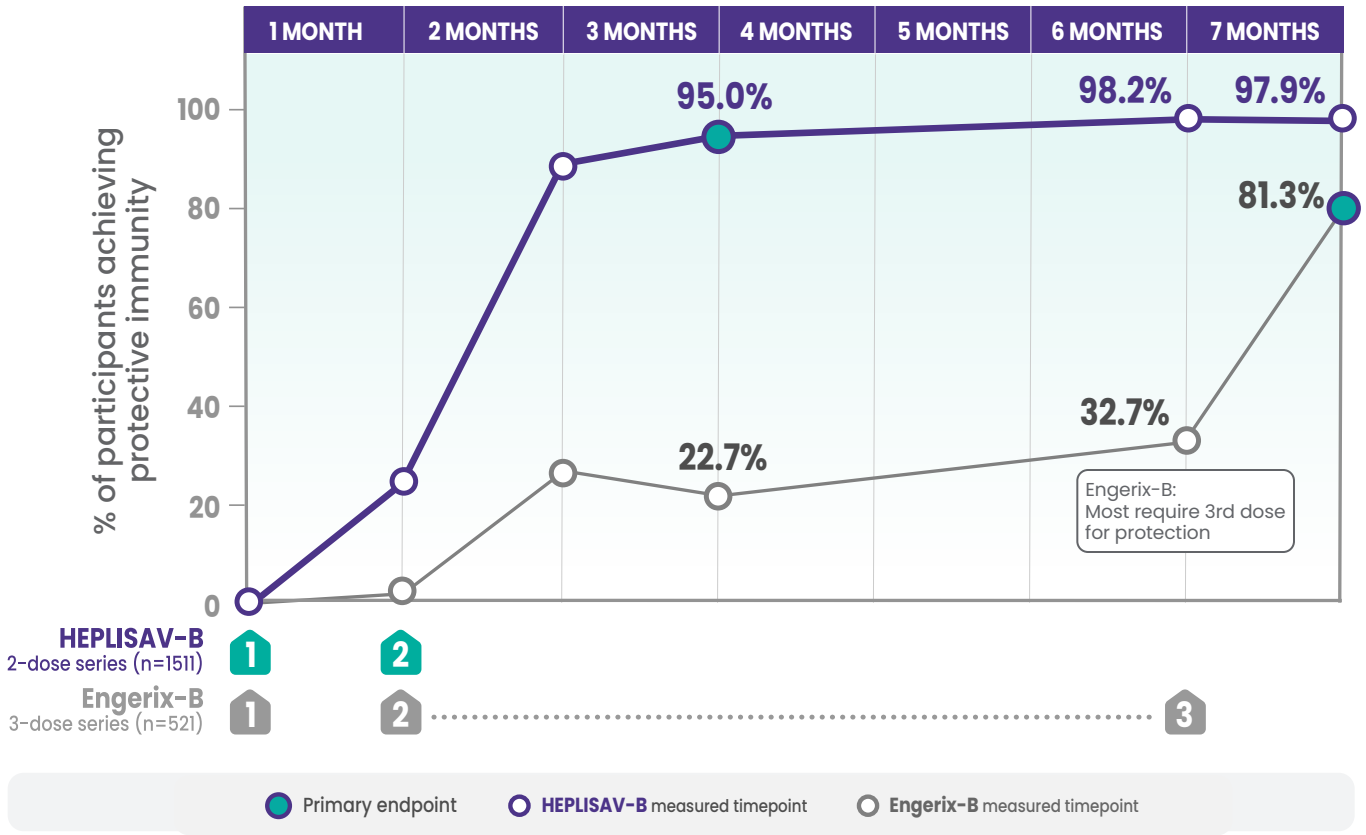
HEPLISAV-B®

Hepatitis B Vaccine (Recombinant), Adjuvanted

IN HEAD-TO-HEAD STUDIES, 2-DOSE HEPLISAV-B SHOWED FASTER AND HIGHER RATES OF PROTECTION[1,2]

95% of those who received HEPLISAV-B were protected after just 2 doses in 1 month*

TRIAL 1 **Percentage of participants aged 18–55 achieving protective immunity†**



- The primary analysis compared the rate of protective immunity at week 12 for HEPLISAV-B with that at week 28 for Engerix-B
- Noninferiority was met because the lower bound of the 95% CI of the difference in SPRs‡ was greater than -10%

*Compared to 81.3% who received 3 doses of Engerix-B.

†Protective immunity defined as antibody concentration ≥10mIU/mL.

‡13.7% difference (95% CI, 10.4–17.5)

CI=confidence interval; SPR=seroprotection rate

IMPORTANT SAFETY INFORMATION (CONT.)

Appropriate medical treatment and supervision must be available to manage possible anaphylactic reactions following administration of HEPLISAV-B.

Please see Important Safety Information throughout and available full Prescribing Information.

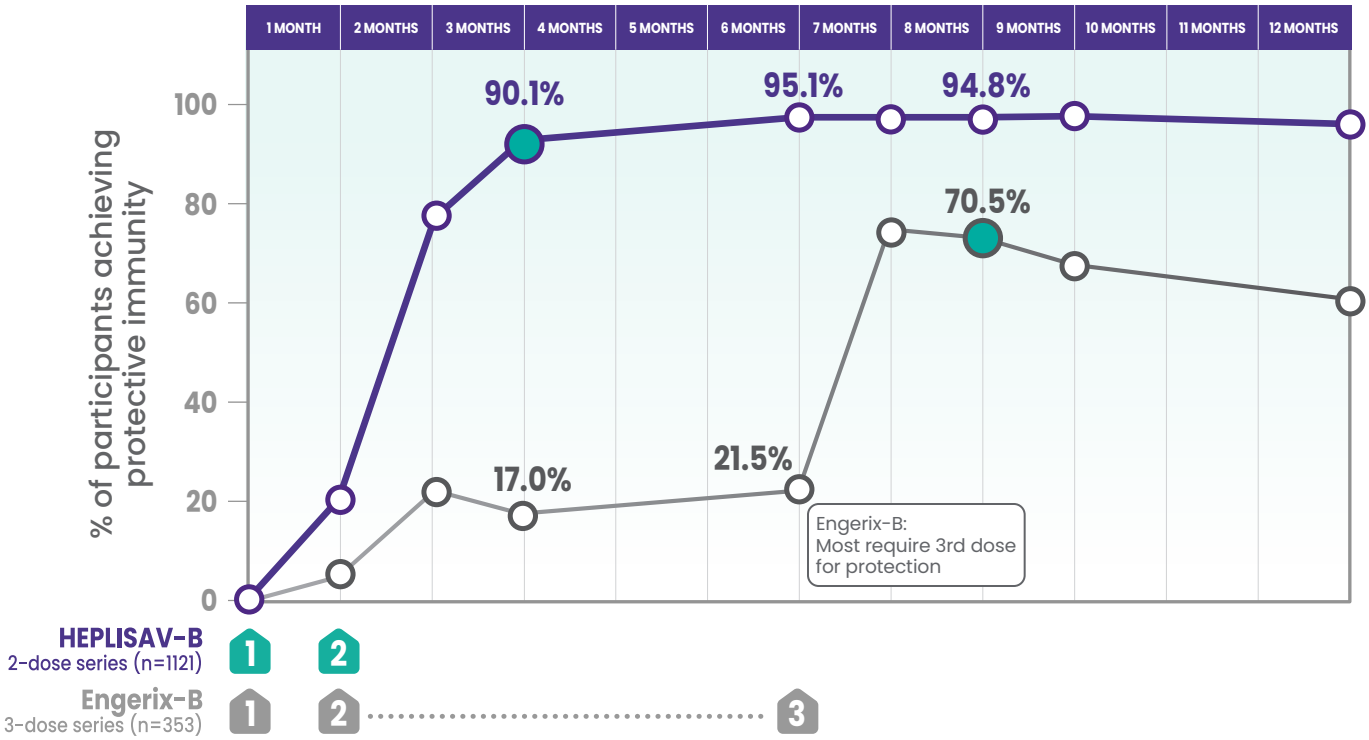
2 DOSES. 1 MONTH.[1]

HEPLISAV-B®
Hepatitis B Vaccine (Recombinant), Adjuvanted

2-DOSE HEPLISAV-B PROTECTS MORE PATIENTS FASTER[1,2]

90.1% of those who received HEPLISAV-B were protected after just 2 doses in 1 month[§]

TRIAL 2 **Percentage of participants aged 40–70 achieving protective immunity[¶]**



- The primary analysis compared the rate of protective immunity at week 12 for HEPLISAV-B with that at week 32 for Engerix-B
- Noninferiority was met because the lower bound of the 95% confidence interval of the difference in SPRs[#] was greater than -10%. The SPR following HEPLISAV-B was statistically significantly higher than following Engerix-B (lower bound of the 95% confidence interval of the difference in SPRs was greater than 0%)

[§]Compared to 70.5% who received 3 doses of Engerix-B.

[¶]Protective immunity defined as antibody concentration ≥10 mIU/mL.

[#]19.6% (95% CI, 14.7–24.8)

IMPORTANT SAFETY INFORMATION (CONT.)

Immunocompromised persons, including individuals receiving immunosuppressant therapy, may have a diminished immune response to HEPLISAV-B.

Hepatitis B has a long incubation period. HEPLISAV-B may not prevent hepatitis B infection in individuals who have an unrecognized hepatitis B infection at the time of vaccine administration.

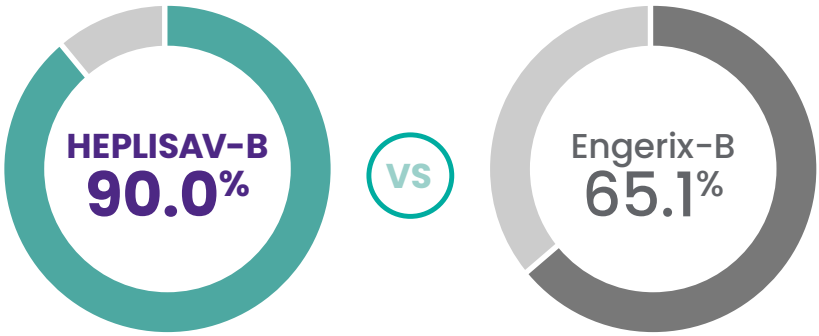
Please see Important Safety Information throughout and available full Prescribing Information.

HIGHER RATES OF PROTECTION IN DIABETES AND OTHER KNOWN HYPORESPONSIVE POPULATIONS[1,2]

TRIAL 3 **Percentage of participants aged 18–70 achieving protective immunity***

ADULTS ACHIEVING PROTECTIVE IMMUNITY

Patients with Diabetes (n=961) (Primary Analysis)



Other Known Hyporesponsive Populations (Secondary Analysis)

	Total Trial Population (N=6665)	Male (N=3353)	Aged 60 to 70 (N=1745)	Obesity (N=3241)	Smokers (N=2082)
HEPLISAV-B	**95.4%**	**94.5%**	**91.6%**	**94.7%**	**95.9%**
	VS	VS	VS	VS	VS
Engerix-B	81.3%	78.8%	72.6%	75.4%	78.6%

- The primary analysis compared the seroprotection rate at week 28 for HEPLISAV-B (n=640) with that at week 28 for Engerix-B (n=321) in subjects with type 2 diabetes mellitus. Noninferiority of the seroprotection rate induced by HEPLISAV-B compared to Engerix-B was demonstrated
- A secondary analysis compared the seroprotection rate at week 24 for HEPLISAV-B with that at week 28 for Engerix-B in the total study population. Noninferiority of the seroprotection rate induced by HEPLISAV-B compared to Engerix-B was demonstrated
- Other secondary analyses compared the seroprotection rate at week 24 for HEPLISAV-B with that at week 28 for Engerix-B, in subgroups defined by age, sex, body mass index (BMI), and smoking status among adults aged 18 to 70 years. For each subgroup noninferiority of the seroprotection rate induced by HEPLISAV-B compared to Engerix-B was demonstrated

*Protective immunity defined as antibody concentration ⩾10mIU/mL.

IMPORTANT SAFETY INFORMATION (CONT.)

The most common patient-reported adverse reactions reported within 7 days of vaccination were injection site pain (23%-39%), fatigue (11%-17%), and headache (8%-17%).

Please see Important Safety Information throughout and available full Prescribing Information.

2 DOSES. 1 MONTH.[1]

HEPLISAV-B®
Hepatitis B Vaccine (Recombinant), Adjuvanted

HEPLISAV-B IS PREFERENTIALLY RECOMMENDED WITHIN SUB-POPULATIONS[12-14]

HIV†

IDSA & NIH prefer HEPLISAV-B for use in vaccine-naïve people living with HIV[12,13]

IBD†

AGA prefers HEPLISAV-B for patients with IBD who have not responded to previous hepatitis B vaccination[14]

HEPLISAV-B WAS FOUND TO BE ECONOMICALLY DOMINANT VS ENGERIX-B[15]

in a study modeling cost-effectiveness across adult populations,‡ including:

- Patients with **diabetes**
- Patients with **CKD**
- **Older adults**
- Patients with **obesity**
- Patients with **HIV**
- People who **inject drugs**

HEPLISAV-B decreased costs and increased benefits
in these hyporesponsive subgroups

Benefits measured in quality-adjusted life years gained by preventing hepatitis B infection.

‡This modeling study evaluated the cost-utility of using HEPLISAV-B vs Engerix-B in selected adult populations. Study limitations include: outcomes are based on a static model and may not fully reflect real-world variations.[15]

†If HEPLISAV-B is not available, other hepatitis B vaccines may be used. Immunocompromised persons, including those receiving immunosuppressant therapy, may have a diminished immune response to HEPLISAV-B.[1,12,14]

AGA=American Gastroenterological Association; CKD=chronic kidney disease; HIV=human immunodeficiency virus; IBD=inflammatory bowel disease; IDSA=Infectious Diseases Society of America; NIH=National Institute of Health

IMPORTANT SAFETY INFORMATION (CONT.)

There are no adequate and well-controlled studies of HEPLISAV-B in pregnant individuals. Available data, primarily in individuals who received one dose of HEPLISAV-B in the 28 days prior to or during pregnancy, do not suggest an increased risk of major birth defects and miscarriage.

Please see Important Safety Information throughout and available full Prescribing Information.

HEPLISAV-B HAS A DEMONSTRATED SAFETY PROFILE[1]

Safety profile comparable with Engerix-B across 3 clinical trials in more than 10,000 patients

Percentage of subjects with an adverse event (with up to 12 months of follow-up)

			Unsolicited Adverse Event*		Serious Adverse Event	Potentially Immune-Mediated Adverse Event†
Trial 1	**HEPLISAV-B (N=1810)**	Within 28 days of any injection	**42.0%**	Within 7 months of the first vaccine dose	**1.5%**	**0.2%**
	Engerix-B (N=605)		41.3%		2.1%	0.7%
Trial 2	**HEPLISAV-B (N=1968)**	Within 28 days of any injection	**35.4%**	Within 12 months of the first vaccine dose	**3.9%**	**0.2%**
	Engerix-B (N=481)		36.2%		4.8%	0.0%
Trial 3	**HEPLISAV-B (N=5587)**	Within 28 days of any injection	**20.1%**	Within 13 months of the first vaccine dose	**6.2%**	**0.1%**
	Engerix-B (N=2781)		20.1%		5.3%	0.0%

The most common patient-reported adverse reactions reported within 7 days of vaccination were injection site pain (23%–39%), fatigue (11%–17%), and headache (8%–17%).

*For trial 3, only unsolicited medically attended adverse events—those for which a subject sought medical care—were captured.
†For trials 2 and 3, only new-onset autoimmune adverse events are included.

Per CDC, providers can administer 2-dose HEPLISAV-B to **pregnant persons** needing hepatitis B vaccination[16]

CDC=Centers for Disease Control and Prevention

IMPORTANT SAFETY INFORMATION (CONT.)

It is not known whether HEPLISAV-B is excreted in human milk. Data are not available to assess the effects of HEPLISAV-B on the breastfed infant or on milk production/excretion.

Vaccination with HEPLISAV-B may not result in protection of all vaccine recipients.

Please see Important Safety Information throughout and available full Prescribing Information.

2 DOSES. 1 MONTH.[1]

HEPLISAV-B®
Hepatitis B Vaccine (Recombinant), Adjuvanted

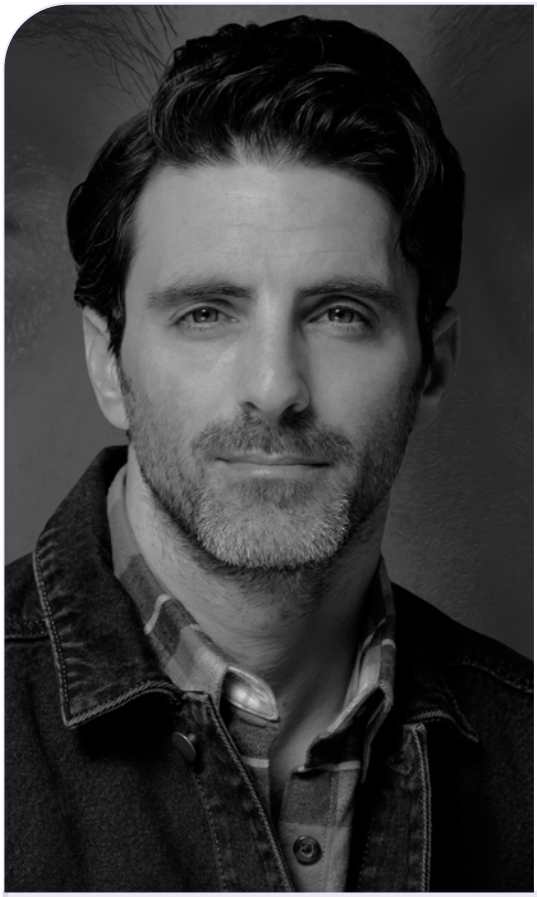
Of those who had a preference,

~3 OUT OF 4 PATIENTS

PREFERRED A 2-DOSE, 1-MONTH VACCINE OPTION

VS A 3-DOSE, 6-MONTH OPTION[17]

Response from a national online survey conducted by The Harris Poll from September 30 to October 2, 2024, with 2,090 U.S. adults (ages 18+) who had previously agreed to participate. Data were weighted by demographic and socioeconomic factors to ensure representativeness. Excluded 973 patients who selected no preference or not at all sure. Limitations: As with all sample surveys, results may be affected by various sources of error that cannot be fully quantified.



HERE'S HOW TO START HEPLISAV-B...

1 **ORDER**
2-dose HEPLISAV-B:
the #1-ordered adult hepatitis B vaccine[1,18*]

2 **START**
vaccinating new adult patients with **2-dose HEPLISAV-B**[1]

3 **PROTECT**
more patients, **faster**[1,2]

Per CDC, HEPLISAV-B and other adult hepatitis B vaccines are interchangeable. Vaccination should not be delayed if previously administered vaccine product is unknown or unavailable. When feasible, the same manufacturer's vaccines should be used to complete the series.[19†]

HEPLISAV-B is covered with no out-of-pocket cost to the patient

Commercial insurance, Medicare, and Medicaid must cover ACIP-recommended vaccines, like HEPLISAV-B, with no cost-sharing.[20‡§]

The ACIP recommends hepatitis B vaccination for all adults aged 19–59 and for adults aged ≥60 years with risk factors. Adults aged ≥60 years without known risk factors may receive hepatitis B vaccination. This recommendation does not apply to adults who have received a complete HBV vaccine series in their lifetime or have a history of HBV infection.[21]

*IQVIA National Sales Panel, based on 2025 YTD data, accessed September 29, 2025.

†Data are limited on the safety and immunogenicity effects when HEPLISAV-B is interchanged with hep-B vaccines from other manufacturers. A series containing 2 doses of HEPLISAV-B administered at least 4 weeks apart is valid, even if the patient received an earlier dose of a different hep-B vaccine.[19]

‡Coverage and cost may vary and are subject to change without notice. Reimbursement decisions are made by individual insurance plans.

§The Advisory Committee on Immunization Practices recommends vaccines for CDC review and publication; all recommendations are eligible for first-dollar coverage.[22]

Please see Important Safety Information throughout and available full Prescribing Information.

...AND HERE'S WHY TO START HEPLISAV-B

Hepatitis B can have life-threatening consequences[6,7¶]

Chronic hepatitis B infection can lead to

- Cirrhosis
- Liver transplant
- Liver cancer
- Death

Series completion is critical for protection[5]

~2x more adults completed the 2-dose HEPLISAV-B series[4#]
than those starting with 3-dose Engerix-B

This could mean

- **MORE** patients protected
- **LESS** provider burden
- **BETTER HEDIS** compliance[‖]

2-dose HEPLISAV-B provides faster and higher rates of protection[1,2]

vs 3-dose Engerix-B in head-to-head studies

START HEPLISAV-B TODAY

The only adult 2-dose hepatitis B vaccine that can be completed in just **1 month**[1,3]

¶For most adults, HBV clears on its own. But for those who don't clear the virus, it can progress to chronic hepatitis B and potentially life-threatening consequences such as liver cancer. From 2018–2023, there were an estimated 13,000–22,000 cases of acute hepatitis B annually in the US.[6,10]

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‖Hepatitis B vaccination in adults aged 19–59 years is part of the Healthcare Effectiveness Data and Information Set (HEDIS®) quality measures, which falls under the Adult Immunization Status (AIS-E) composite and is set by NCQA.[23,24] This means that your institution may be measured on hepatitis B vaccine series completion in this age group.[24]

HEDIS=Healthcare Effectiveness Data and Information Set

2 DOSES. 1 MONTH.[1]

HEPLISAV-B®
Hepatitis B Vaccine (Recombinant), Adjuvanted

Please see Important Safety Information throughout and available full Prescribing Information.

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INDICATION

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The most common patient-reported adverse reactions reported within 7 days of vaccination were injection site pain (23%-39%), fatigue (11%-17%), and headache (8%-17%).

There are no adequate and well-controlled studies of HEPLISAV-B in pregnant individuals. Available data, primarily in individuals who received one dose of HEPLISAV-B in the 28 days prior to or during pregnancy, do not suggest an increased risk of major birth defects and miscarriage.

It is not known whether HEPLISAV-B is excreted in human milk. Data are not available to assess the effects of HEPLISAV-B on the breastfed infant or on milk production/excretion.

Vaccination with HEPLISAV-B may not result in protection of all vaccine recipients.

ADDITIONAL IMPORTANT INFORMATION

HEPLISAV-B does not treat liver diseases such as cirrhosis or liver cancer.[1]

Not all liver cancer is caused by the hepatitis B virus.[25]

Please see available full Prescribing Information, scan the QR code, or visit heplisavbhcp.com for full Prescribing Information.

DYNAVAX

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December 2025 US-25-00-00254

2 DOSES. 1 MONTH.[1]

HEPLISAV-B®
Hepatitis B Vaccine (Recombinant), Adjuvanted