



AASLD Responds to Federal Court Ruling Preserving Hepatitis Vaccine

Court decision halts implementation of changes that threatened to disrupt longstanding evidence-based vaccine recommendations

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Alexandria, VA – The American Association for the Study of Liver Diseases (AASLD) supports a recent federal court ruling that temporarily blocks proposed changes to the U.S. immunization schedule, preserving access to the universal hepatitis B birth dose and routine childhood hepatitis A vaccination.

The decision, issued March 16, halts implementation of changes that threatened to disrupt longstanding, evidence-based vaccine recommendations critical to preventing liver disease, chronic infection, and liver cancer.

“This ruling is a critical and immediate safeguard for liver health and patients nationwide. It also ensures the stability of evidence-based standards that underpin clinical research, public health monitoring, and ongoing scientific progress, especially in hepatology,” said Saul J. Karpen, MD, PhD, FAASLD, President of AASLD. “Any disruption to hepatitis A and B vaccination would have real and lasting consequences, especially for newborns and vulnerable populations, and additionally the scientific community at-large. The universal hepatitis B birth dose is one of the most effective interventions we have to prevent lifelong infection and liver cancer. Preserving these recommendations reinforces reliance on trusted expertise and is essential to protecting lifelong liver health and broader public health.”

The universal hepatitis B birth dose plays a critical role in preventing perinatal transmission and early childhood infection, key drivers of chronic hepatitis B, cirrhosis, and liver cancer. Routine hepatitis A vaccination remains an essential safeguard against a preventable disease that can lead to severe complications, including acute liver failure.

The ruling follows months of intensified advocacy by AASLD, its members, and the hepatology community. Throughout 2025, AASLD engaged federal leaders, submitted formal policy comments, and worked in coalition with U.S.-based patient and health care organizations to raise urgent concerns about the proposed changes. Following the January ACIP vote advanced the recommendations, AASLD continued to advocate for the preservation of evidence-based immunization policy.

“This moment underscores why sustained, science-driven advocacy matters,” Karpen added. “AASLD will continue to advocate and act decisively to ensure that policies affecting liver health are grounded in the best possible scientific evidence.”

AASLD remains actively engaged in ongoing federal advocacy efforts to ensure continued access to life-saving vaccines and to protect the integrity of the nation’s immunization framework.

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