initially distributed from August 1990 through August 1991 and had expiration dates from April 1991 through May 1992. These 16 lots compromise 366,000 doses of a total of approximately 2 million doses of PedavaxHIB® distributed, or about 1% of all Hib conjugate vaccine released in the United States since January 1990. Although vaccine from these lots induced a lower antibody response, the precise level of antibody necessary for protection is not known, and there is not clear evidence that children receiving vaccine from these lots are at increased risk for disease. Given the limited period of distribution of these vaccine lots, it is unlikely that many children received all three recommended doses (2, 4, and 12-15) months of age) from lots with reduced immunogenicity. In addition, most children who have received vaccine from these lots will now be >18 months of age and at lower risk for Hib disease. The company will contact physicians who received the vaccine from these lots and has suggested that selected recipients of these lots receive an additional dose of Hib conjugate vaccine. Inquiries about use of vaccine from these lots may be directed to Merck and Co., Inc. ([215] 652-7300, collect).

All current lots of PedavaxHIB® that have been tested have expected immunogenicity. In view of the success of the Hib conjugate vaccines in preventing Hib disease, the Advisory Committee on Immunization Practices recommends that physicians should ensure that all children are up-to-date with the recommended Hib conjugate vaccine schedule. To facilitate post marketing evaluation of Hib conjugate vaccines, physicians are encouraged to record lot numbers and manufacturers of vaccines administered for all children and to report any cases of invasive Hib disease in a child <5 years of age to local and state health departments.

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Healthcare Workers Are Offered Insurance for HIV Infection

A growing number of healthcare employers and associations are offering insurance for healthcare workers against human immunodeficiency virus (HIV) infection. Insurance companies are able to single out HIV infection for special coverage because the risk of acquiring such an infection on the job is small.

In October 1992, Harvard University, Cambridge, Massachusetts, started insuring their 50,000 medical students and health care workers against HIV infection, paying \$100,000 to anyone infected on the job.

In 1991, the American Medical Association began offering a \$500,000 insurance policy for occupationally acquired HIV for physicians, residents, and medical students. Annual costs for this policy are \$940, and over 2,000 individuals have already applied.

Critics of such policies argue that it is discriminatory to offer coverage for just one category of disease when healthcare workers are exposed to other communicable diseases, such as hepatitis. Some state insurance regulators are concerned that flat payments to healthcare workers who test positive for HIV that are not related to a person's economic loss from testing positive for HIV infection would create the potential for abuse. The Connecticut state insurance commission, for example, recently told insurers that such insurance policy payments would need to be tied to a specific loss of income, for example, compensation for HIV-infected physicians who lose their practice when patients learn of their condition.

More extensive policies are being offered for hospitals and other healthcare facilities that pay workers for HIV infection without requiring proof of occupational exposure. One such policy is being offered by the American Hospital Association with a lump sum benefit of up to \$250,000 for HIV infection, requiring no proof of occupational accident. Another such policy is being offered by a Boston-based insurance company. For both of these policies, employees with occupationally acquired HIV would be afforded the same benefits as those with nonoccupational HIV infection.

Fifth Annual World AIDS Day, December 1, 1992

"AIDS: A Community Commitment" was the theme selected by the World Health Organization (WHO) for the fifth annual World AIDS Day on December 1, 1992. The theme focused attention on the men, women, and children throughout the world who are infected with human immunodeficiency virus