

IN THIS ISSUE: Hepatitis Awareness Month – Testing for Hepatitis B in Pregnant Women

HEPATITIS AWARENESS MONTH – TESTING FOR HEPATITIS B IN PREGNANT WOMEN

Introduction

May is Hepatitis Awareness Month. The Washoe County Health District (WCHD) would like to again remind healthcare providers about the importance of screening patients for hepatitis, especially pregnant women. WCHD's Perinatal Hepatitis B Prevention Program (PHBPP) helps to coordinate with healthcare providers and birthing hospitals to prevent perinatal transmission of hepatitis B.

Mandatory Hepatitis B Screening for All Pregnant Women

The purpose and ultimate goal of screening pregnant women for hepatitis B is to prevent perinatal transmission of the infection. For those women who are identified as positive for hepatitis B, post-exposure prophylaxis (PEP) can be provided to the baby within 12 hours of birth to prevent disease transmission. Only 1% of infants receiving PEP develop hepatitis B, decreasing the incidence of liver cancer or cirrhosis.

Nevada Administrative Code (NAC) 441A.570 requires that *a pregnant woman shall be screened by her health care provider for the presence of hepatitis B surface antigen. The health care provider shall refer a pregnant woman who is positive for hepatitis B surface antigen to the health authority for counseling and recommendations on testing and immunizing contacts.*

To ensure exposed infants receive timely PEP, all HBsAg-positive pregnant women must be reported to the Communicable Disease Program prior to delivery. **HBsAg-positive persons can be reported by using the confidential fax line at (775) 328-3764.**

Available Tests for Hepatitis B

The Advisory Committee on Immunization Practices (ACIP) guidelines for prevention of perinatal HBV infection and management of pregnant women include the following:

- ◆ All pregnant women should be tested routinely for HBsAg during an early prenatal visit (e.g., first trimester) ***in each pregnancy, even if they have been previously vaccinated or tested.***
 - When ordering prenatal testing it is important to use an obstetric or prenatal panel. This will alert health departments receiving results that the woman is pregnant. **THIS DOES NOT REPLACE A PROVIDER'S DUTY TO REPORT A POSITIVE HBsAg WOMAN TO THE HEALTH AUTHORITY.**

- Three laboratories widely used in Washoe County offer prenatal panels. See table below.

ARUP Laboratories	Panel-Prenatal Reflexive Panel (Test Code-0095044)
	Standalone-HBV Surface Antigen with Reflex to Confirmation, Perinatal (Test Code-2007573)
LabCorp	Panel-Prenatal Profile I with Hepatitis B Surface Antigen (Test Code-202945)
	Panel-Hepatitis Profile XIII (HBV Prenatal Profile) (Test Code 265397)
Quest Diagnostics	Obstetric Panel (Test Code-20210)

- ◆ In addition, the following groups should be tested at the time of admission to the hospital for delivery:
 - women who were not screened prenatally,
 - women who engage in behaviors that put them at high risk for infection (e.g., recent or current injection drug use, having had more than one sex partner in the previous 6 months or a HBsAg-positive sex partner, evaluation or treatment for a sexually transmitted disease, HIV infection, chronic liver disease, or end-stage renal disease, and international travel to regions with HBsAg prevalence of ≥ 2%), and
 - women with clinical hepatitis.
- ◆ HBsAg-positive pregnant women should be provided with or referred for appropriate counseling and medical management. See the attached CDC Testing for Hepatitis B Virus Infection During Pregnancy Flowchart for Prenatal Providers on page 2.

Duty of Healthcare Provider to Report

The majority of HBsAg-positive reports originate from the laboratory performing the prenatal labs. ***This means that most health care providers inappropriately rely exclusively upon the laboratories to submit these reports for them, which is not in compliance with Nevada law.*** It is possible for a case to be missed, especially if a HBsAg-positive woman moves to this community after having her prenatal testing done by a provider outside of Washoe County. Although her medical record may follow her in the transfer of care, the HBsAg-positive result will not be reported to the WCHD unless the health care provider takes the initiative to do so.

NAC441A.570 also states *the health care provider of an infant born to a woman carrying hepatitis B surface antigen shall ensure that the infant is given hepatitis B immune globulin [HBIG] and hepatitis B vaccine within 12 hours of birth with the vaccine series being completed on a schedule established by the division.*

Providers should also attach an alert notice to the patient's medical record to remind the delivery hospital/nursery of the patient's HBsAg + status and the newborn's need for hepatitis B vaccine and HBIG at birth.

All delivery hospitals should implement policies and procedures to ensure that:

- 1) infants born to HBsAg-positive mothers and infants born to mothers with unknown HBsAg status are identified, and
- 2) PEP is initiated for these infants. ACIP recommends that all infants born to HBsAg-positive women or to women with unknown HBsAg status receive single-antigen hepatitis B vaccine and HBIG (0.5mL) **within 12 hours of birth.**

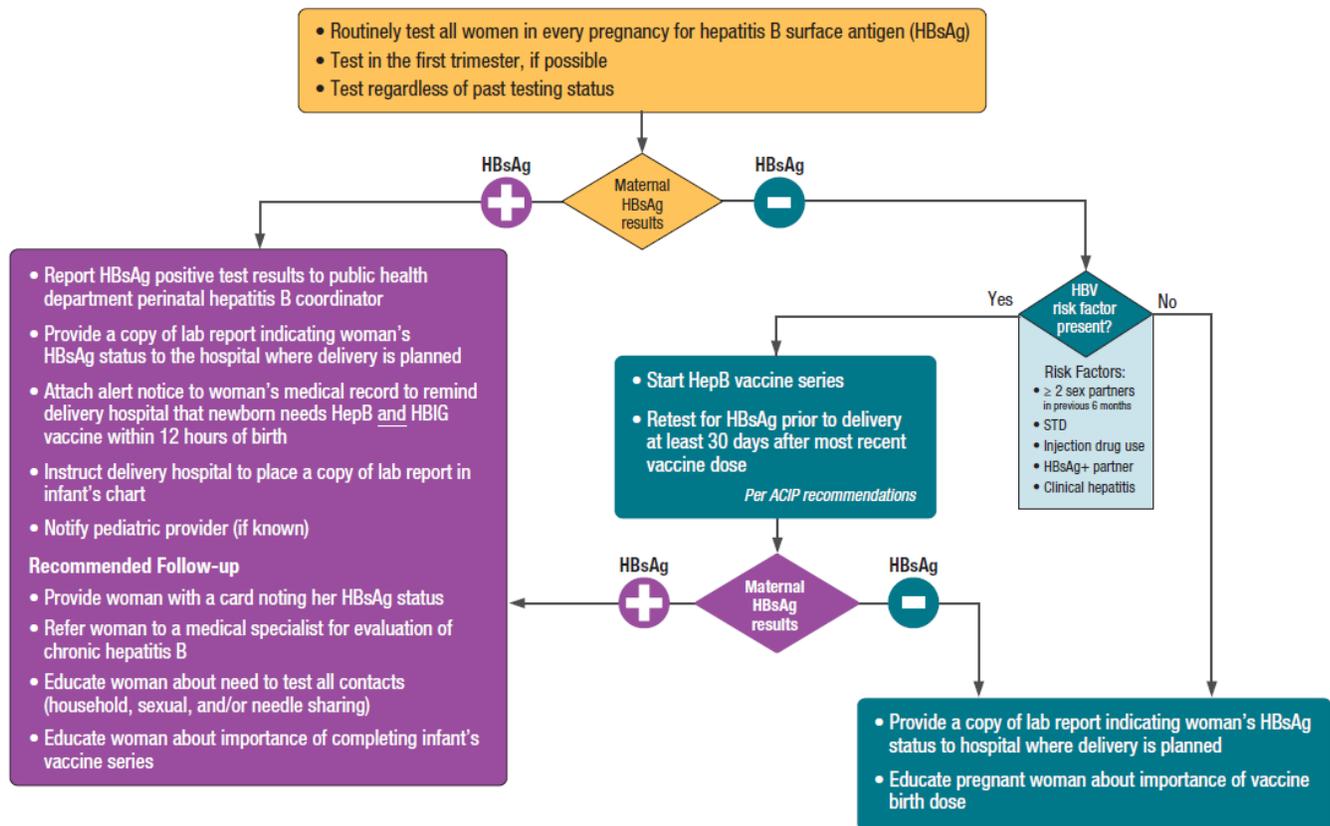
When a HBsAg-positive pregnant woman is reported to the WCHD, the PHBPP will notify the delivery hospital two to three months prior to the expected delivery date. This is another safeguard put in place, so hospital staff are aware of the mother's HBsAg + status and that PEP is provided to the infant within 12 hours of birth.

After delivery, the PHBPP works with the mother and infant's immunization provider to make sure the infant receives all of their recommended hepatitis B vaccinations. Post-vaccination testing is completed to ensure PEP and vaccinations were effective in protecting against disease transmission and that the infant developed immunity to hepatitis B. Testing is performed at 9-12 months of age or 1-2 months after their last dose of hepatitis B vaccine, if the routine schedule was not followed. Again all laboratories, hospitals and health care providers must report HBsAg-positive test results promptly to the local health authority. In Washoe County, reports should be faxed to the **Communicable Disease Program** confidential reporting line at **(775) 328-3764**. For more information, please contact the Communicable Disease Program at **(775) 328-2447**.

Testing for Hepatitis B Virus Infection During Pregnancy Flowchart for Prenatal Providers



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention



Resources available at www.CDC.gov/hepatitis/perinatalHepB