



Preventing Perinatal Hepatitis B

Guidelines for Prenatal Care Providers

Timely postexposure prophylaxis is very effective in preventing perinatal hepatitis B transmission. When a mother is infected with hepatitis B, her infant must be given hepatitis B immunoglobulin (HBIG) and hepatitis B vaccine within 12 hours of birth. The following guidelines are based on Advisory Committee on Immunization Practices (ACIP) Recommendations¹.

TEST PREGNANT WOMEN

- **Providers are mandated to test pregnant women for hepatitis B surface antigen (HBsAg)** (California Health and Safety Code, Section 125085). The HBsAg test should be ordered at an early prenatal visit with every pregnancy.
- **Re-test an HBsAg-negative woman before delivery** if she has clinical hepatitis or if she was at risk for hepatitis B exposure during pregnancy. Risk factors include recent intravenous drug use, an HBsAg-positive sex partner, more than one sex partner in the past 6 months, or recent treatment for a sexually transmitted disease.
- **Test HBsAg-positive pregnant women for hepatitis B e antigen (HBeAg)**, because HBeAg-positivity is associated with an increased risk of perinatal transmission of hepatitis B virus. Refer HBeAg-positive pregnant women to a specialist for evaluation and possible antenatal treatment.
- **Laboratories** performing HBsAg testing should use a test that is approved or licensed by the FDA and should adhere to the manufacturer's directions. Repeat testing and confirmation of reactive HBsAg results are required.

REPORT HEPATITIS B CASES

- **Laboratories and medical providers are mandated to report positive HBsAg results** to the local health department (California Code of Regulations, Section 125085, and Title 17, Section 2500 [b]).
- **Submit a copy of the laboratory report** documenting the woman's HBsAg status to the birth hospital. Notation of the woman's HBsAg status on the prenatal record is not sufficient because laboratory test results can be misinterpreted and because transcription errors can occur.

VACCINATE

- **Vaccinate** pregnant women who are at risk for infection with hepatitis B virus if they are HBsAg-negative and are not immune (anti-HBs negative).

REFER AND INFORM

- **Inform** the HBsAg positive woman of the importance of **postexposure prophylaxis** and **postvaccination serologic testing** for her infant and that **breastfeeding** is safe.
- **Refer** HBsAg positive pregnant women for medical management and counseling.

For additional information, go to <http://www.cdc.gov/hepatitis/HBV/PerinatalXmntn.htm> or <http://www.cdph.ca.gov/HealthInfo/discond/Pages/PerinatalHepatitisBPrevention.aspx>

¹A Comprehensive Immunization Strategy to Eliminate Transmission of Hepatitis B Virus Infection in the United States, Recommendations of the Advisory Committee on Immunization Practices (ACIP) Part 1: Immunization of Infants, Children, and Adolescents, MMWR, December 23, 2005 / 54(RR16);1-23 http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5416a1.htm?s_cid=rr5416a1_e