

# PERINATAL HEPATITIS B



Department of  
Public Health  
CITY OF PHILADELPHIA

## A Guide for Prenatal Care and Pediatric Providers

The Philadelphia Department of Public Health's Perinatal Hepatitis B Prevention Program (PHBPP) follows all Hepatitis B (Hep B)-positive pregnant women from delivery through the first year of life of their child. The program helps ensure that infants receive post-exposure prophylaxis (PEP) and both women and their children receive adequate follow up testing.

### OVERVIEW

**40%** of infants born to Hep B (+) women become infected if PEP is not administered.

**<1%** is the rate of vertical transmission in the United States with PEP being administered.

### PHILLY FACTS

**175** women are Hep B (+) and pregnant each year in Philadelphia.

**~11%** of infants in Philadelphia are born to women from countries where Hep B is endemic.

### ALL PREGNANT WOMEN SHOULD BE TESTED:

All pregnant women should be screened for Hep B surface antigen (HBsAg) during each pregnancy. Testing should be repeated if there is a new or ongoing risk of exposure to Hep B before delivery. Examples of risks include drug use, risky sexual behaviors & unlicensed tattoos.

#### PRENATAL CARE PROVIDERS

##### If woman is HBsAg (+)

- Test for Hep B DNA and Hep B envelope antigen (HBeAg).
- Inform the birthing hospital and pediatrician.
- Report all pregnancies of Hep B (+) women to the PHBPP.

##### HBeAg (+) or Hep B DNA >200,000 IU/mL

- The risk of vertical transmission is increased!
- Hep B treatment may be indicated during the third trimester of pregnancy.
- Immediately refer the woman to a Hep B specialist for evaluation.

##### HBeAg (-) or Hep B DNA <200,000 IU/mL

- The risk of vertical transmission is decreased.
- Refer all HBsAg (+) women to Hep B specialist.

#### PEDIATRIC PROVIDERS for children of Hep B(+) women

##### Administer HBIG

- Administer Hep B Immunoglobulin (HBIG) within 12 hours of birth for best protection.
- If not given at birth, give HBIG within 7 days.

##### Administer Hep B Vaccine Birth Dose

- Administer birth dose within 12 hours of birth.

##### Complete Hep B Vaccine Series

- Combo antigen vaccine doses at 2, 4, & 6 mths
- OR For single antigen vaccine
- Born > 2,000 g, 2 doses at 1-2 & 6 mths
- Born < 2,000 g, 3 doses at 1, 2-3, & 6 mths

##### Conduct Post- Vaccination Testing

- At 9-12 months test for HBsAg to identify infection & for Hep B surface antibody (HBsAb) to confirm Hep B immunity.
- If HBsAg (+) refer to pediatric specialist.
- If HBsAb (-) give dose of Hep B vaccine & retest 30-45 days after.

#### INFANT HEP B TESTING GUIDE

Hep B Positive → Report to PHBPP

HBsAg (+) & HBsAb (-)

Not Immune → Revaccinate

HBsAg (-) & HBsAb (-)

Immune → No Action Needed

HBsAg (-) & HBsAb (+)

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**PREGNANT WOMEN**  
Test for Hep B Surface Antigen (HBsAg)

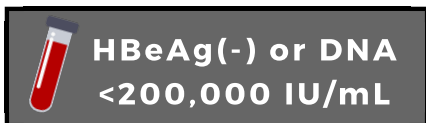
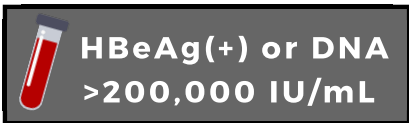


Woman is infected with Hep B.

- Woman is not infected with Hep B.
- Repeat HBsAg testing if she has continued risk exposure.\*

\*Risk factors listed on reverse

Test for Hepatitis B  
envelope antigen (HBeAg) & DNA



- The risk of vertical transmission is increased.
- Refer woman to Hep B specialist during pregnancy.
- Treatment may be indicated.

Refer all HBsAg (+) women  
to Hep B specialist.

**CHILDREN OF HEP B-POSITIVE WOMEN**  
Give Post Exposure Prophylaxis,  
Vaccinate with Hep B Series, & Test

### PEDIATRIC HEP B VACCINATION & TESTING RECOMMENDATIONS

AGE OF CHILD	ACTION
At Birth within 12 hrs	Administer HBIG <u>and</u> birth dose of vaccine
2, 4, & 6 mths <small>OR</small> If born > 2,000 g, 1-2 & 6 mths If born < 2,000 g, 1, 2-3, & 6 mths	Vaccinate with Hep B-containing combo doses  Vaccinate with single antigen dose
9-12 mths	Test for HBsAg <u>and</u> Hep B surface antibody