

PERINATAL HEPATITIS C



Department of
Public Health
CITY OF PHILADELPHIA

A Guide for Prenatal Care and Pediatric Providers

The Philadelphia Department of Public Health's Perinatal Hepatitis C Program (PHCP) was established in 2016. The program follows all Hepatitis C (Hep C) positive pregnant women through delivery until adequate follow-up testing is performed on the woman and infant. This is the only program of this type in the nation!

OVERVIEW

5.6% of infants born to Hep C positive women become infected.



There is no pre- or post- exposure prophylaxis for Hep C to prevent vertical transmission.

PHILLY FACTS

~300 women are Hep C (+) and pregnant each year in Philadelphia.

15% of infants born 2011-2013 to Hep C (+) women were tested for Hep C by 24 months of age.

AT-RISK WOMEN SHOULD BE TESTED:

All pregnant women with known risk factors for Hep C should be screened for Hepatitis C Antibody (Hep C Ab) & if positive tested for Hep C RNA. Testing should be repeated before delivery if she is at continued risk for Hep C exposure. Risks include history of injection or illicit drug use, risky sexual behaviors, & non-commercial tattoos.

PRENATAL CARE PROVIDERS

If woman is Hep C Ab (+)

- Woman has been exposed to Hep C.
- Test for Hep C RNA to confirm infection.
- Report Hep C Ab (+) result & pregnancy to PHCP.

If woman is Hep C RNA (+)

- Woman is currently infected with Hep C and there is risk of vertical transmission to child!
- Refer her immediately to a Hep C specialist for access to treatment and cure.
- Inform the birthing hospital and pediatrician.
- Counsel the woman on behaviors to prevent Hep C transmission to others.

If woman is Hep C RNA (-)

- Woman is not currently infected with Hep C.
- Counsel her on behaviors to prevent reinfection.
- Repeat RNA testing if she has continued risk exposure during pregnancy.

PEDIATRIC PROVIDERS test children of Hep C (+) women

2-12 months of age

- Test for Hep C RNA and test again after 12 months of age, or at least 2 months after initial Hep C RNA test.
- Two tests are required regardless of result, as viral load can fluctuate in the first year of life.

OR 12 months of age or older

- Test once for Hep C RNA.

OR 18 months of age or older

- Test once for Hep C Ab; testing Hep C Ab before 18 months of age will reflect residual maternal Hep C Ab.
- If Hep C Ab (+), follow-up with a test for Hep C RNA to confirm infection.

If a child tests Hep C RNA (+) report to PHCP and refer child to a pediatric Hep C specialist!

QUICK HEP C TESTING GUIDE

Hep C Positive	Previously Exposed to Hep C	No Exposure to Hep C
Hep C Ab (+) & Hep C RNA (+)	Hep C Ab (+) & Hep C RNA (-)	Hep C Ab (-) & Hep C RNA (-)

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AT-RISK WOMEN*
Test for Hepatitis C Antibody (Hep C Ab)



Woman has been exposed to Hep C.

Test for Hep C RNA
to confirm infection



- Woman is currently infected with Hep C and there is risk of vertical transmission to child.
- Refer woman to Hep C specialist immediately.



- Woman is not currently infected with Hep C.
- Repeat RNA testing if she is at continued risk of exposure to Hep C during pregnancy.



- Woman has not been exposed to Hep C.
- Repeat Hep C Ab testing if she is at continued risk of exposure to Hep C.

*Risk factors listed on reverse

CHILDREN OF HEP C-POSITIVE WOMEN
Test for Hep C Infection

PEDIATRIC HEP C TESTING RECOMMENDATIONS	
AGE OF CHILD	ACTION
2-12 months of age	Test for Hep C RNA <u>and</u> test again after 12 months of age, or at least 2 months after initial Hep C RNA test.
OR 12 months of age or older	Test once for Hep C RNA
OR 18 months of age or older	Test once for Hep C Ab. If Hep C Ab (+) test for Hep C RNA to confirm.