

# Preventing Perinatal Hepatitis B

## Guidelines for Prenatal Care Providers

May 2022



Timely postexposure prophylaxis (PEP) of the infants of hepatitis B-infected women is very effective in preventing perinatal hepatitis B virus (HBV) 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 per the recommendations of the Advisory Committee on Immunization Practices (ACIP)<sup>1</sup>.

However, even infants who have received appropriate PEP can still become infected, typically when the mother has a high HBV viral load during pregnancy. To ensure that HBV-infected pregnant women with high viral loads are identified, [ACIP and the American College of Obstetricians and Gynecologists \(ACOG\) recommend HBV DNA screening](#) of all HBV-infected pregnant women. The American Association for the Study of Liver Disease (AASLD) also recommends antiviral therapy for pregnant women with HBV DNA levels >200,000 IU/mL.<sup>1</sup> For more information, see Figure on page 2, the latest [ACIP Recommendations](#)<sup>1</sup>, or the [ACOG website](#).

### 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 and should be ordered during 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 or current intravenous drug use, an HBsAg-positive sex partner, more than one sex partner in the past 6 months, or recent treatment for an STI.
- **Test all HBsAg-positive pregnant women for HBV DNA** (viral load). Patient with HBV DNA  $\geq 200,000$  IU/mL are at increased risk of perinatal transmission of hepatitis B virus and are recommended to receive antiviral treatment.
- **Refer all HBsAg-positive pregnant women** to a primary care physician or liver specialist for evaluation and possible antiviral treatment.

### DISCREPANT HBSAG LABORATORY TESTING RESULTS

- Occasionally, prenatal care providers receive unexpected HBsAg-positive test results for pregnant women who do not have known risk factors for hepatitis B infection or who may have multiple sets of results with discrepant HBsAg findings. In these cases, **CDPH recommends repeating HBsAg testing, as well as ordering total anti-HBc, IgM anti-HBc and HBV DNA testing**. If the woman's status remains unclear at the time of delivery, the healthcare provider should consider providing PEP to the infant. Please feel free to contact your [local health department](#) with any questions about hepatitis B testing.

### REPORT HEPATITIS B CASES

- **Laboratories and medical providers are mandated to report positive HBsAg results** to the local health department of the patient (California Code of Regulations, Section 125085, and Title 17, Section 2500 [b]).

<sup>1</sup> Schillie S, Vellozzi C, Reingold A, et al. Prevention of Hepatitis B Virus Infection in the United States: Recommendations of the Advisory Committee on Immunization Practices. *MMWR Recomm Rep* 2018;67(No. RR-1):1–31. DOI: <http://dx.doi.org/10.15585/mmwr.rr6701a1>

## Preventing Perinatal Hepatitis B — Guidelines for Prenatal Care Providers

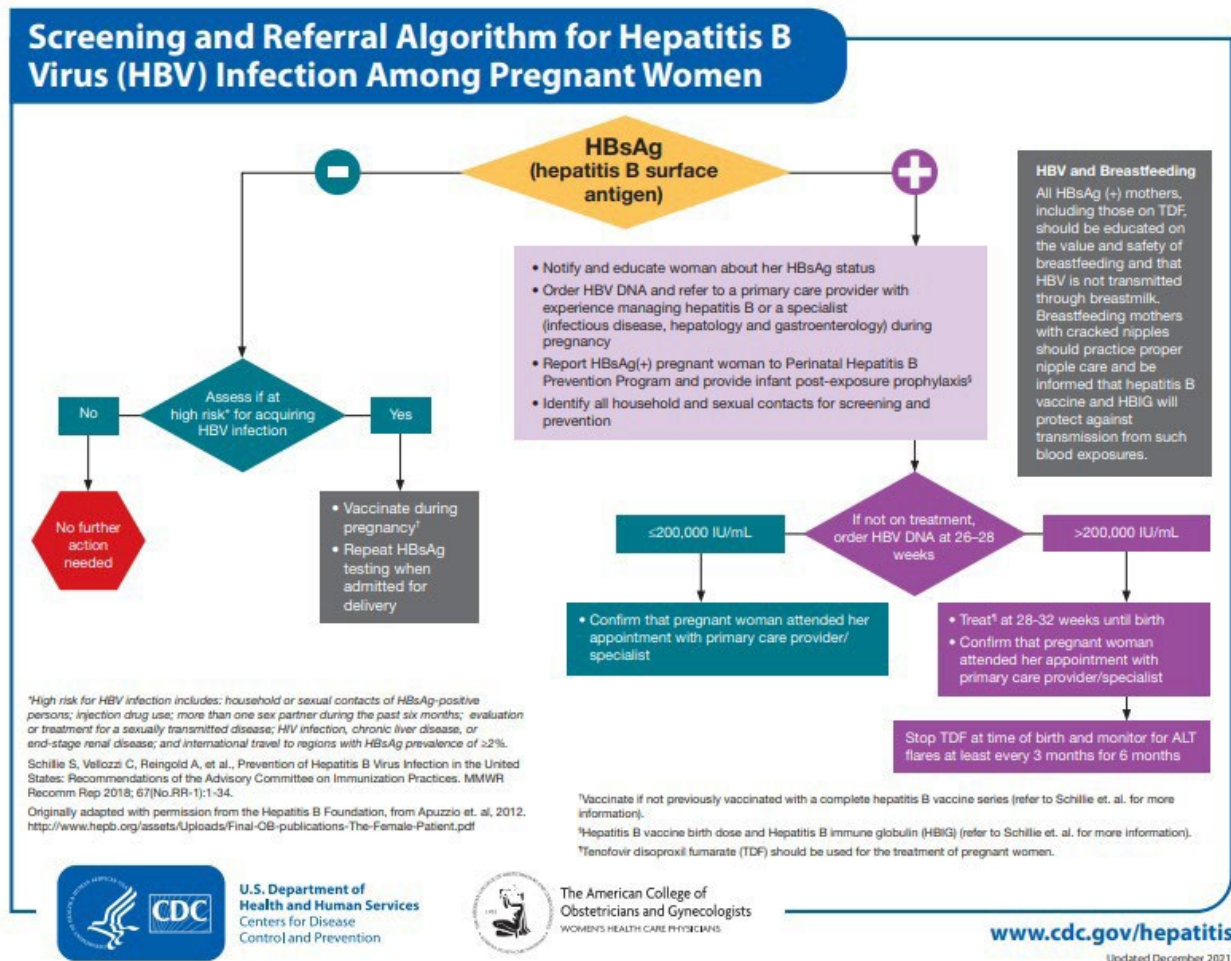
- **Submit a copy of the laboratory report** documenting the woman's HBsAg status to the birth hospital. Notation of the woman's HBsAg status on the prenatal record is not sufficient because laboratory test results can be misinterpreted and transcription errors can occur.

### VACCINATE

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

### INFORM AND REFER

- **Inform** HBsAg-positive women of the importance of **postexposure prophylaxis** and **postvaccination serologic testing** for their infants, and that **breastfeeding** is safe after their infant receives HBIG and hepatitis B vaccine at birth.
- **Refer** HBsAg-positive pregnant women to a specialist for **medical management and counseling** if she is not already receiving such care.



For additional information, go to the [CDC Perinatal Hepatitis B Prevention Program website](http://www.cdc.gov/perinatal-hepatitis-b) or the [CDPH Perinatal Hepatitis B Prevention Program website](http://www.cdc.gov/perinatal-hepatitis-b).

**Preventing Perinatal Hepatitis B — Guidelines for Prenatal Care Providers**