PERINATAL HEPATITIS B
A Prevention Strategy

Douglas County Health Department, Omaha, NE
Why Prevention is Important

• About 1.25 million people in the U.S. have chronic hepatitis B infection
• Hepatitis B is 100 times more contagious than HIV

Each year:
• up to 80,000 people (mostly young adults 25 - 44 years) get infected with hepatitis B virus
• More than 11,000 people have to stay in the hospital because of hepatitis B
• 4,000 to 5,000 people die from chronic hepatitis B related to liver disease
Hepatitis B virus can cause short-term (acute) illness that leads to:

• loss of appetite
• tiredness
• diarrhea and vomiting
• jaundice (yellow skin or eyes)
• pain in muscles, joints and stomach
Hepatitis B can cause long-term (chronic) illness that leads to:

- liver damage (cirrhosis)
- liver cancer
- death
The following four sets of guidelines will assist you in protecting newborns against Hepatitis B.
Labor and Delivery Guidelines
The initial step will always be
- review HBsAg lab report and
  copy the test result onto:

• *Mom’s* Labor and Delivery record
• *the infant’s* delivery record
It is **essential** to examine a copy of the **original** lab report!

Don’t rely on handwritten prenatal record- 
transcription error &/or misinterpretation of lab tests may have occurred.
If HBsAg result is not available

• Order the test **STAT**
• Instruct the lab to call the nursery **ASAP** with the result
The test that needs to be ordered is the hepatitis B surface antigen (HBsAg)

Make sure this test result is accurately recorded on:
• the labor and delivery record and
• on the infant’s delivery summary sheet
ALERT The Nursery IF

• The mother is HBsAg positive
• The HBsAg result is not known

These infants require immunoprophylaxis within 12 hours of birth with:

• Hepatitis B vaccine
• and HBIG if mother is HBsAg positive
Tell the Mom (who is *positive* or status unknown) about

- The necessity of administering both injections to her baby within 12 hours of birth

If possible, tell the Mom before the birth of the baby
ATTENTION LABOR & DELIVERY STAFF: Expecting mother is infected with Hepatitis B

Mother’s Information

<table>
<thead>
<tr>
<th>Name:</th>
<th>DOB:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>EDC:</th>
<th>Phone:</th>
<th>Emergency Contact:</th>
<th>Phone:</th>
</tr>
</thead>
</table>

Infant Information

<table>
<thead>
<tr>
<th>Last Name:</th>
<th>First Name:</th>
<th>Middle I.:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>DOB:</th>
<th>Gender:</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Anticipated Pediatrician:</th>
<th>Phone:</th>
<th>Fax:</th>
</tr>
</thead>
</table>

Address

HBIG and Hepatitis B Vaccine Record- Series 1

<table>
<thead>
<tr>
<th>Series 1</th>
<th>Date</th>
<th>Dose</th>
<th>Time</th>
<th>Manufacturer</th>
<th>Given within 12 hrs of birth?</th>
</tr>
</thead>
<tbody>
<tr>
<td>HBIG</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>1st Hep B dose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>

Reporting Hospital:______________________Nurse Name:______________________Phone:____________________

Please provide information requested above after baby is born and fax to:

Douglas County Health Department

Attn: Essi Havor RN, BSN, Perinatal Hepatitis B Coordinator

Phone (402) 444-3771    Fax (402) 546-0709.
Nursery Unit Guidelines

For infants born to HBsAg-positive Moms
Administer HBIG and hepatitis B vaccine at separate body sites within 12 hours of birth

- HBIG - Give 0.5 mL IM
- Hepatitis B Vaccine - give 0.5 mL pediatric formulation IM
Federal Law requires you to give the parent a VIS (Vaccine Information Statement) prior to vaccine administration.

VISs can be downloaded from IAC’s website at www.immunize.org/vis/
Give Mom an immunization card with the record of HBIG and Hepatitis B immunization included.

Instruct Mom to bring the card with her each time she brings baby in for well care.
Is it all right for a Hepatitis B Positive Mom to breastfeed her baby?
Breast Feeding

A mother who wishes to breastfeed should be encouraged to do so provided her infant is given HBIG and Hepatitis B vaccine within 12 hours of birth.
Provide Mom with educational and written materials regarding:

• The importance of finishing the immunization schedule
• The importance of post vaccination testing at 9 to 15 months of age (test for antibodies to verify immunity) . . .
...and

- The mother’s need for ongoing medical follow-up for her chronic hepatitis B infection
- The importance of household members being tested for hepatitis B and vaccinated if susceptible
Notify your local or state health department that the infant has been born and has received post-exposure prophylaxis (include dates of receipt of HBIG and hepatitis B vaccine)

Douglas County – Charlette Hudson: 402-444-6426
Lancaster County – Angie Elliott: 402-471-2361
STATEWIDE – Karen Rutherford: 402-441-6257
Obtain the name, address, and phone number of the infant’s primary care clinic and doctor.

Notify them of

- the infant’s birth,
- the receipt of post-exposure prophylaxis, and
- the need for follow-up vaccination and post-vaccination testing
Nursery Guidelines

For infants born to mothers with unknown HBsAg status
Administer hepatitis B vaccine (0.5 mL pediatric formulation) IM within 12 hours of birth
Confirm that the lab has drawn a serum specimen from the mother for an HBsAg test

Verify when the mother’s HBsAg results will be available and that it will be reported to L&D and the nursery STAT
If the HBsAg report is positive, contact the physician **ASAP** for additional orders

- The infant needs to receive HBIG *as soon as possible*. If more than 7 days have elapsed since exposure (birth), there is little benefit in HBIG administration.
- Document appropriately in newborn’s medical record.
- If the nursery does not receive the report of the mother's HBsAg test at the expected time, call the laboratory for the result.
Infants born to HBsAg negative mothers

The first dose of hepatitis B vaccine (0.5 mL pediatric formulation) is recommended during the newborn period, preferably before the infant is discharged from the hospital and no later than 2 months of age.
Guidelines for Preterm Infants
Preterm infants whose mothers are HBsAg positive OR

Preterm infants whose mothers HBsAg status is unknown:

Should be given hepatitis B vaccine and HBig within 12 hours of birth.
For all preterm Infants

- The birth dose of hepatitis B should not be counted, and
- The infant should receive 3 additional doses at 1, 2, and 6 months of age.
NOTE: If there is no documentation (preferably a laboratory report) on the mother’s chart that indicates that she is HBsAg negative,

Hepatitis B vaccine should be administered to the infant within 12 hours of birth.
Infants born to HBsAg-negative mothers but who are at high risk of early childhood infection:

• Infants whose mothers belong to populations and groups from areas of moderate to high endemicity for HBV infection, or

• Any infant who lives in a household with a person who is chronically infected with hepatitis B.
Areas with moderate and high endemicity for HBV infection are:

- Africa
- Asia
- Indonesia
- Philippines
- Middle East
- Pacific Islands
- Amazon Basin
- Haiti
- Dominican Republic
- Eastern and southern Europe and the former Soviet Union
- Alaska natives
High risk infants

- Administer hepatitis B vaccine (0.5 mL pediatric formulation) prior to nursery discharge.
- Give the mother an immunization record card, and instruct her on the importance of completing the series of injections.
- Make sure the infant’s hospital record clearly indicates vaccine administration, and always forward record to the infant’s primary care clinic.
YOU CAN HELP TO HALT THE SPREAD OF HEPATITIS B

- Review the HBsAg results of all mothers at or before the time of delivery
- Give immunoprophylaxis within 12 hours after birth to infants of HBsAg-positive mothers and infants of mothers who do not have documentation of HBsAg test results on their charts
For more information, you can contact:

**In Douglas County**
Charlette Hudson  
402-444-6426

**In Lancaster County**
Angie Elliott  
402-471-2361

**STATEWIDE**
Karen Rutherford: 402-441-6257
• Information in this presentation taken from Labor & Delivery Unit and Nursery Unit guidelines to Prevent HBV Transmission (item #P2130, 5/09) which was compiled by Immunization Action Coalition and reviewed for technical accuracy by the Centers for Disease Control and Prevention.

• Content organized by Douglas County Health Department.


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