

HEPATITIS B



Testing and Vaccination

Who needs hepatitis B vaccine?

People in the groups listed below are at moderate or high risk for hepatitis B virus (HBV) infection and should be vaccinated.

- Immigrants/refugees from areas of high HBV endemicity (Asia, Sub-Saharan Africa, Amazon Basin, Eastern Europe, Middle East) as well as children born in the United States to persons from these areas
- Alaska Natives and Pacific Islanders
- Household contacts and sex partners of people with chronic HBV infection
- People who have had a recent sexually transmitted disease
- People with more than one sex partner in six months
- Men who have sex with men
- Users of illicit injectable drugs and their sex partners
- Health care workers and public safety workers who have contact with blood
- Adopted children from countries where HBV is endemic
- Hemodialysis patients
- Recipients of certain blood products
- Clients and staff of institutions for the developmentally disabled
- Inmates in long-term correctional facilities
- Certain international travelers

Hepatitis B vaccination is recommended for all children 0–18 years of age.

Who needs serological testing?

Serologic testing prior to vaccination may be recommended depending on the specific level of risk and/or likelihood of previous exposure. If you decide to test, draw the blood first, and then give the first dose of vaccine at the same office visit. Vaccination can then be continued, if needed, based on the results of the tests. If you are not sure who needs screening, call your liver disease consultant or your state or local health department for details. It is especially important to screen individuals who have emigrated from endemic areas. When people with chronic HBV infection are identified, offer them appropriate disease management. In addition, their household members and intimate contacts should be screened and, if found susceptible, vaccinated.

Note: Serological testing is not recommended before routine vaccination of infants and children, and is not routinely recommended following vaccination of infants, children, adolescents, or most adults.

Hepatitis B Lab Nomenclature

- HBsAg:** Hepatitis B surface antigen is a marker of infectivity. Its presence indicates either acute or chronic HBV infection.
- anti-HBs:** Antibody to hepatitis B surface antigen is a marker of immunity. Its presence indicates an immune response to HBV infection, an immune response to vaccination, or the presence of passively acquired antibody. (It is also known as **HBsAb**, but this abbreviation is best avoided since it is often confused with abbreviations such as HBsAg.)
- anti-HBc:** Antibody to hepatitis B core antigen is a marker of acute, chronic, or resolved HBV infection. It is not a marker of vaccine-induced-immunity. It may be used in pre-vaccination testing to determine previous exposure to HBV infection. (It is also known as **HBcAb**, but this abbreviation is best avoided since it is often confused with other abbreviations.)
- IgM anti-HBc:** IgM antibody subclass of anti-HBc. Positivity indicates recent infection with HBV (<6 mo.). Its presence indicates acute infection.
- IgG anti-HBc:** IgG antibody subclass of anti-HBc is a marker of past or current infection with HBV. If it and HBsAg are both positive (in the absence of IgM anti-HBc), this indicates chronic HBV infection.
- HBeAg:** Hepatitis B “e” antigen is a marker of a high degree of HBV infectivity, and it correlates with a high level of HBV replication. It is primarily used to help determine the clinical management of patients with chronic HBV infection.
- Anti-HBe:** Antibody to hepatitis B “e” antigen may be present in an infected or immune person. In persons with chronic HBV infection, its presence suggests a low viral titer and a low degree of infectivity.
- HBV-DNA:** HBV Deoxyribonucleic acid is a marker of viral replication. It correlates well with infectivity. It is used to assess and monitor the treatment of patients with chronic HBV infection.

Interpreting the Hepatitis B Panel

| Tests | | | | Interpretation |
|-------|----------------|--------------|----------|--|
| HBsAg | Total Anti-HBc | IgM Anti-HBc | Anti-HBs | |
| NR | NR | NR | NR | Susceptible, never infected |
| R | NR | NR | NR | Acute infection, early incubation* |
| R | R | R | NR | Acute infection |
| NR | R | R | NR | Acute resolving infection |
| NR | R | NR | R | Past infection, recovered and immune |
| R | R | NR | NR | Chronic infection |
| NR | R | NR | NR | False positive(i.e. Susceptible), past infection, or low level chronic infection |
| NR | NR | NR | R | Immune due to vaccination if titer is >10 mIU/mL |

NR=Non-Reactive R=Reactive

*Transient HBsAg positivity (lasting <18 days) might be detected in some patients during vaccination.

Sources: Centers for Disease Control and Prevention. A Comprehensive Immunization Strategy to Eliminate Transmission of Hepatitis B Virus Infection in the United States Dec.2005. MMWR 2005;54(RR16)1-23; and MMWR 2006; 55(RR16);1-25

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