

HEPATITIS B VIRUS AND PREGNANCY

Hepatitis B basics

Hepatitis B is an infection of the liver caused by the hepatitis B virus (HBV). Persons who are newly infected (acute infection) with hepatitis B virus may develop symptoms such as loss of appetite, tiredness, abdominal pain, nausea, vomiting, dark (tea or cola-colored) urine, light-colored stools, and sometimes joint pain or skin rash. Jaundice (yellowing of the eyes or skin) may also be present. Some people have no symptoms at all and may not know they have been infected. Regardless, any person who has the virus can spread it to other people.

Most people who have an acute infection recover without problems. However, a small number (5% to 10%) will develop chronic infection (if the virus is present in the body for more than six months, the person is considered to have a chronic infection). Most people who are chronically infected have no symptoms and feel healthy. However, some people develop non-specific symptoms at times when the virus is reproducing and causing liver problems. People with lifelong hepatitis B infection can develop cirrhosis of the liver, liver cancer, and/or liver failure, which can lead to death.

An exposure is defined as contact with blood or other body fluids of an infected person. Contact includes touching the blood or body fluids when a person has open cuts or wounds, splashing blood or bloody body fluids into the eyes or mouth, being stuck with a needle or other sharp object that has blood on it, or having sex or sharing needles with someone with hepatitis B. A baby can get hepatitis B from its infected mother during childbirth. It is not spread through food or water or by casual contact (e.g., shaking hands or kissing the face of a person who is infected with hepatitis B).

Anyone who has an exposure to a person infected with hepatitis B virus should have blood tests done as soon as possible to determine whether transmission occurred. At the time of exposure, persons who have never had the disease or vaccine (susceptible to the virus) should receive a dose of hepatitis B immune globulin (HBIG) immediately and then the first dose of hepatitis B vaccine. Doses two and three of the vaccine series should be completed on schedule. In some cases, people who have already been vaccinated may be tested and/or revaccinated.

Hepatitis B and pregnancy

If a mother is infected with hepatitis B during her pregnancy, there is a chance that her baby may also become infected. If the mother develops acute hepatitis in the third trimester of pregnancy or immediately after giving birth, the risk of infection for the newborn baby may be 60% to 70%. It is very important that the baby receive treatment right after birth to get as much protection as possible.

If the mother has hepatitis B virus in her blood, she can pass hepatitis B to her baby during the labor and delivery process. More than 90% of infants infected in the first year of life will develop chronic infection. They may have the virus for the rest of their lives and be a source to spread the disease. There may be long-term health effects from acquiring hepatitis B at such an early age.

All pregnant women should be tested for hepatitis B virus early in their pregnancy. **Testing should be done during each pregnancy.** If the blood test is positive for hepatitis B virus, the baby should receive the first dose of hepatitis B vaccine along with a shot of HBIG within the first 12 hours of life. The second and third doses of vaccine should be given on schedule. Once the baby has turned 1 year of age, the baby should have a blood test to make sure infection did not occur and that the vaccine is protecting the baby.

Exposure to hepatitis B during pregnancy

If pregnant women are exposed to hepatitis B, they should consult their health care provider for information about diagnosis, possible lab tests, and follow-up.

Testing for hepatitis B

The blood test for hepatitis B may show that the patient:

- is immune (had hepatitis B or vaccine in the past) and has no sign of recent infection. The patient is protected and does not need to worry about hepatitis B.
- is not immune and has not yet been infected. The patient should receive the hepatitis B vaccine series if they are at risk of blood exposures at their job or through risky behaviors in their personal life.
- has had a recent infection. Discuss the situation with the health care provider.
- has a chronic infection. A health care provider will determine medical evaluation and monitoring.

Hepatitis B prevention

Pregnant women can do the below to protect themselves against hepatitis B:

- Get hepatitis B vaccine. It is safe to get hepatitis B vaccine while you are pregnant.
- Wear gloves when handling blood and body fluids. Note that there are no special precautions for handling breast milk in a childcare setting (see Section 3).
- Wear gloves when cleaning and disinfecting objects or surfaces contaminated with blood (see Section 2). Wash hands after removing gloves.
- Do not share personal care items, such as toothbrushes, razors, or nail clippers.
- Use condoms during all sexual encounters (vaginal, anal, and oral). Limit the number of sexual partners.
- Do not share needles to inject drugs or to perform tattoos or body piercings.

For more information, call Hennepin County HSPHD-Epidemiology at (612) 543-5230 or call your local health department.