

HEPATITIS B SEROLOGY

Various serological markers appear and disappear during acute and chronic hepatitis B infections. Although hepatitis B serology is complex and a number of lab tests are in use, the following guidelines indicate some of the most commonly used serological tests for perinatal hepatitis B case management.

PREGNANT WOMEN	HBsAg	Hepatitis B Surface Antigen
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If a women’s HBsAg test result is positive, she is infectious whether the infection is acute or chronic, and her baby needs protection. On January 1, 1991, a California law mandated that all pregnant women be screened for hepatitis B surface antigen (HBsAg) and results be reported to the Los Angeles County Department of Public Health’s Perinatal Hepatitis B Prevention Program.

HOUSEHOLD CONTACTS AND SEXUAL CONTACT	Anti-HBs & Anti-HBc & HBsAg	Antibody to Hepatitis B surface Antigen Antibody to Hepatitis B Core Antigen Hepatitis B Surface Antigen
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If a woman is HBsAg positive, there may still be time to protect the household members and sex partners from infection. Test contacts for anti-HBs, anti-HBc, and HBsAg and give the first dose of hepatitis B vaccine immediately after collection of blood sample. If anti-HBs, anti-HBc, and HBsAg are negative, continue vaccine series. If the HBsAg is negative and the anti-HBs test and anti-HBc are positive, the contact is immune. If the HBsAg is positive, the patient is infected and needs further medical evaluation.

INFANTS BORN TO HBsAg+ MOTHER, AFTER PROPHYLAXIS	Anti-HBs & HBsAg	Antibody to Hepatitis B Surface Hepatitis B Surface Antigen
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Postvaccination testing for quantitative anti-HBs and HBsAg to determine if the infant has been protected by the immunoprophylaxis should be performed after completion of the vaccine series at 9 - 18 months of age (generally at next well-child visit). Testing should not be done before age 9 months. If the HBsAg is negative and the anti-HBs test is positive, the infant is immune from vaccination. If the HBsAg is positive, the infant is infected and needs further medical evaluation. HBsAg-negative infants with anti-HBs levels <10 mIU/mL should be reimmunized with 3 doses and retested.

Perinatal Hepatitis B Prevention Program

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