

Hepatitis B Facts

Acute (short-term) and chronic (long-lasting) effects of hepatitis B virus (HBV) infection are a major health problem.

About 79,000 infections occur in the U.S. each year; 21,000 of those cases are acute (short-term) and symptomatic (showing symptoms) (Centers for Disease Control and Prevention).

As many as 1.6 million people in the U.S. have chronic HBV and can potentially spread the disease to others.

Hepatitis B is a leading cause of liver cancer in the U.S. HBV can be passed from mom to baby during birth (perinatal infection). About 25,000 HBV-infected moms give birth each year in the U.S. Infants infected at birth may later experience potentially deadly complications, like chronic liver disease and liver cancer. Each year, about 4,000 to 5,000 people die from chronic liver disease.

Hepatitis B infection in the Asian-Pacific Islander population is 10%. That's 60 times higher than the infection rate of the general population.

The number of foreign-born residents living with chronic hepatitis B will continue to increase with ongoing immigration from countries where hepatitis B is common.

Unless they get proper post-exposure prevention, up to 90% of babies born to mothers with hepatitis B get infected, and 85% to 95% of those will be chronically infected. Up to one in four chronically infected babies will die from primary hepatocellular carcinoma or cirrhosis of the liver later in life.

While screening rates are high, reporting rates of HBsAg-positive pregnant women remain a problem. Nationally, about 95% of pregnant women receive prenatal HBsAg serologic testing, yet only 47% of expected births to HBsAg-positive pregnant women are identified and reported to perinatal hepatitis B programs (CDC Peritable Outcomes, 2014)

Getting immunized with hepatitis B vaccine is the most effective way to prevent HBV infection. Pregnant women who are infected with HBV can prevent giving HBV to their babies at birth if the baby gets:

- Hepatitis B immune globulin (HBIG) **and** hepatitis B vaccine within 12 hours of birth.
- Additional doses of vaccine at 1-2 months and 6 months of age.

CDC recommends testing all pregnant women for HBV early in each pregnancy even if they already had the vaccine or test. Women who test HBsAg-negative early in pregnancy but are in a high-risk category for HBV should be retested at the delivery hospital.

Pregnant women who test HBsAg positive should be referred to the local health jurisdiction's PHBPP and receive counseling, medical management, and information about HBV. [Emerging evidence](#) suggests HBV treatment during the third trimester is safe and reduces rates of transmission.
