



Both Hepatitis B and C Have Become More Common in Pregnant Women

Viral hepatitis is linked to adverse outcomes in pregnant people, underscoring the need for hepatitis B and C screening.

February 18, 2022 By [Sukanya Charuchandra](#)

Between 2012 and 2018, the prevalence of viral hepatitis has increased among pregnant women, and both [hepatitis B](#) and [hepatitis C](#) are associated with adverse pregnancy outcomes, according to study results presented at the [AASLD Liver Meeting 2021](#).

Bing Chen, MD, of New York University Langone Hospital in Brooklyn, and colleagues analyzed trends in the diagnosis of hepatitis B virus (HBV) and hepatitis C virus (HCV) among pregnant women as well as resulting adverse outcomes using a nationwide database.

The team accessed the National Inpatient Sample database to select all pregnant women between 2012 and 2018. Women with HBV or HCV were included in the analysis; those with acute liver disease were excluded. The researchers considered several diverse outcomes, including Cesarean or preterm delivery, gestational diabetes and preeclampsia or eclampsia, as well as all-cause mortality in the hospital, the duration of hospital stays and the total cost of hospitalization.

The study included 28.68 million pregnant women; of these, 52,445 had hepatitis B and 133,680 had hepatitis C. Those with HBV were more likely to be Asian or Pacific Islander (51%) compared with those without viral hepatitis (6%). In contrast, those with HCV were more likely to be white (82%) than those without viral hepatitis (52%). Women with HCV were about twice as likely as those with HBV to have liver cirrhosis.

From 2012 to 2018, the prevalence of hepatitis B rose from 0.15% to 0.21% and that of hepatitis C increased from 0.32% to 0.58%. In comparison to the women with neither virus, women with HBV had a much higher rate of gestational diabetes (13% versus 7%). Women with HCV were less likely to have gestational diabetes, but they had an increased likelihood of preterm labor (10% versus 6%), higher all-cause mortality (0.05% versus 0.01%) and longer hospital stays (3.4 days versus 2.7 days) than those without viral hepatitis.

“There was a rising prevalence of chronic hepatitis B and chronic hepatitis C over time among pregnant women,” the researchers concluded. “Given current recommendations for universal screening for both HBV and HCV in pregnancy, these findings should inform counseling of women

who are found to have HBV or HCV during pregnancy regarding risk of adverse pregnancy outcomes.”

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