



Identifying Strategies to Eliminate Perinatal Hepatitis B Transmission

Ron Valdiserri of the U.S. Department of Health and Human Services discusses strategies to eliminate perinatal hepatitis B transmission

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The elimination of perinatal hepatitis B transmission—transmission of the virus from mother to child during pregnancy or childbirth—is one of the four overarching goals of the national [Viral Hepatitis Action Plan](#). With fewer than 1,000 estimated cases of perinatal HBV infection occurring each year in the U.S., many see elimination as an achievable goal.

Toward that end, the HHS Office of HIV/AIDS and Infectious Disease Policy (OHAIDP) convened a technical consultation on September 29, 2015 focused on this goal. In recognition of the fact that stakeholders from many sectors must be engaged in coordinated efforts in order to achieve this goal, we assembled a multidisciplinary group of experts for a full day of discussion designed to share best practices and to identify and better understand the challenges that remain so we can strategize collectively about how to address them. The consultation [participants](#) included representatives of professional medical societies, health departments, and advocacy networks as well as colleagues from numerous federal agencies whose work touches on this issue.

Perinatal transmission of HBV is especially serious because approximately 90 percent of HBV-infected newborns develop chronic infection; and up to 25 percent of these children will die prematurely from cirrhosis, liver failure, or liver cancer later in life. Perinatal HBV transmission can be prevented by identifying HBV-infected pregnant women and providing post-exposure prophylaxis (i.e., hepatitis B immune globulin and hepatitis B vaccine) to their infants within 12 hours of birth. This post-exposure prophylaxis is 85%-95% effective when given within 12 hours of birth to infants born to mothers with HBV.

Much of the conversation during the consultation focused on:

- Increasing identification and case management of HBV-positive mothers by the CDC's national [Perinatal Hepatitis B Prevention Program](#)

- Expanding implementation of CDC and U.S. Preventive Services Task Force recommendations on perinatal HBV prevention
- Modification to laboratory reporting to improve identification of expectant mothers with chronic HBV infection
- Identifying and disseminating best practices to routinize perinatal HBV prophylaxis and immunization in hospitals and birthing centers
- Educating mothers about the importance of preventing hepatitis B

Participants identified a number of strategies and best practices to improve outcomes for both infants and their mothers. The participating experts agreed that implementing these activities will require collaborative efforts. “We have the tools to eliminate perinatal HBV transmission in the U.S.,” noted Ms. Corinna Dan, Viral Hepatitis Policy Advisor in OHAIDP, who moderated the discussions. “But we have not fully engaged all necessary stakeholders in the past. This consultation convened representatives of many of the key stakeholder groups and identified new opportunities to combine efforts with a shared vision of eliminating mother-to-infant transmission of HBV in the United States.”

Working across disciplines, we can all strive to sharpen our efforts to identify and protect both mothers and infants in need of HBV services so that we can achieve the national goal of eliminating perinatal hepatitis B transmission and improve health outcomes for women living with HBV.

A report summarizing the recommended strategies is being prepared and will be shared here on the blog when it is ready.

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