

The Vaccinator

A Newsletter of the Communicable Disease Reporting System (CDRS)

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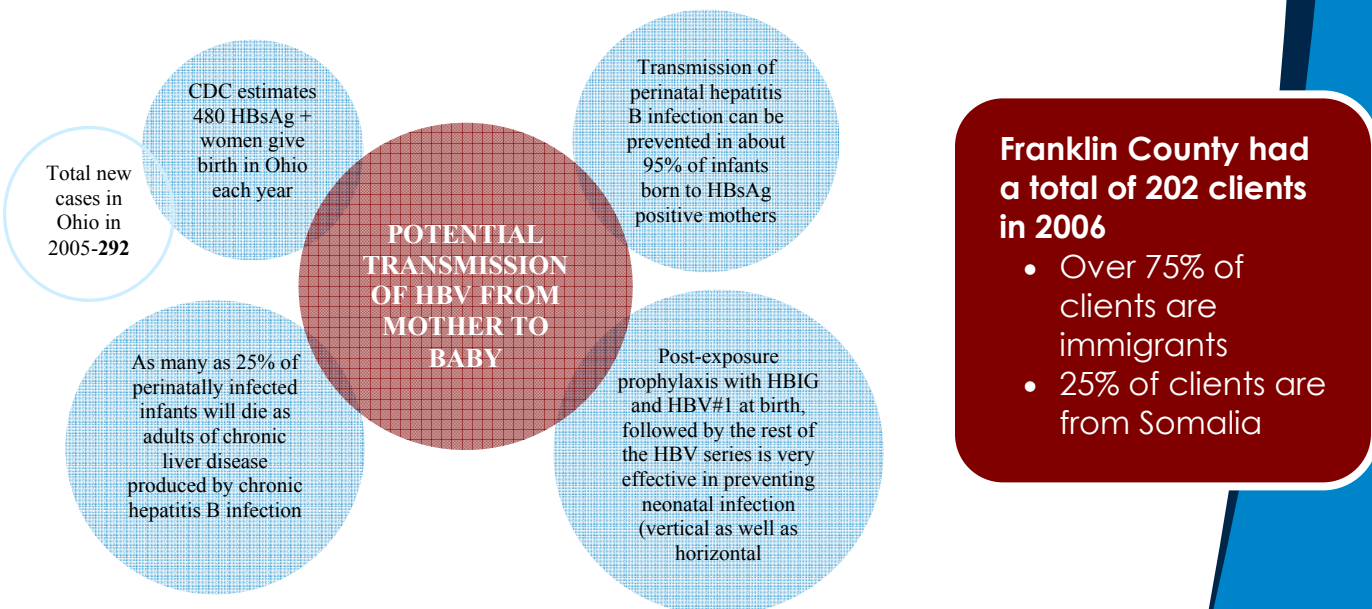
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Perinatal Hepatitis B Prevention Program (PHBPP)

Purpose of the Program

Preventing hepatitis B (HBV) transmission during early childhood is important. Children who become infected under the age of 5 are more likely to develop chronic HBV infection and chronic liver disease.

For infants and children, the two primary sources of HBV infection are perinatal transmission from infected mothers and horizontal transmission from infected household contacts. The risk of Perinatal HBV infection among infants born to HBV infected mothers may be as high as 70-90%. Infants who become infected by perinatal transmission have a 90% risk of chronic infection. HBV transmission rates in infants and children to susceptible household contacts range from 14%--60%. About 25% of those with chronic hepatitis B virus infection die prematurely of liver cancer or cirrhosis or end-stage liver disease. More than 90% of these chronic infections can be prevented if HBsAg positive mother are identified so that their infants can receive hepatitis B vaccine and hepatitis B Immune globulin (HBIG) soon after birth.



Franklin County had a total of 202 clients in 2006

- Over 75% of clients are immigrants
- 25% of clients are from Somalia

Hepatitis B Vaccines

Hepatitis B vaccine is available as a single-antigen formulation **Recombivax HB[®]** and **Engerix-B[®]** and also in fixed combination **Comvax[®]** and **Pediarix[®]**. However, combination vaccines cannot be administered to infants aged <6 weeks; only single-antigen hepatitis B vaccine may be used for the birth dose.

- All infants born to HBsAg-positive women should receive single-antigen hepatitis B vaccine and HBIG (0.5 ml) \leq 12 hours of birth, administered at

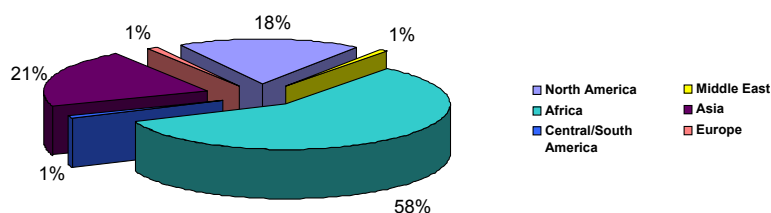


different injection sites. The second and third dose of the vaccine series are given at 1-2 months and 6 months for single antigen hepatitis B vaccine. The final dose in the vaccine series should not be administered before age 24 weeks (164 days). It is acceptable to give 4 doses of Hepatitis B vaccine when combination vaccines are administered.

- For preterm infants weighing <2,000 g, the initial vaccine dose (birth dose) should not be counted as part of the vaccine series because of the potentially reduced immunogenicity of hepatitis B vaccine in these infants; 3 additional doses of vaccine (for a total of 4 doses) should be administered beginning when the infant reaches age 1 month.

Annually, an estimated 20,000 infants are born to women in the U.S. who are hepatitis B surface antigen (HBsAg) positive.

Country of Birth, PHBPP Clients in Franklin County, 2006



Remember to administer “Birth Dose” in the Hospital

**The birth dose must be documented (include date of administration)*

Perinatal Hepatitis B Prevention Coordinator

Columbus Public Health

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Websites

For fact sheet about reportable diseases please check the following websites:

- Columbus Health Department: www.publichealth.columbus.gov
- Columbus and Franklin County Communicable Disease Reporting System or CDRS: www.cdrsinfo.com

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