

Hepatitis B

Information Sheet

What is Hepatitis B?

Hepatitis B is one of several hepatitis viruses (A, B, C, D, E, F, G, and H) which attack the liver. It is spread via infected blood or body fluids. Individuals who have had Hepatitis B virus (HBV) may, in several years, go on to develop permanent liver damage, cirrhosis of the liver or cancer of the liver.

How is it spread?

Hepatitis B virus is highly infectious. Only 1/1,000,000 cc of infected blood is required to spread the disease. Contaminated blood or body fluids enter the body through cracks/cuts in the skin, mucous membranes or directly into the bloodstream. HBV can spread through unprotected sexual contact, sharing contaminated syringes/needles and during childbirth, from a Hepatitis B carrier mother to her infant.

Who can get Hepatitis B?

Anyone who comes in direct contact with blood or body fluids is at risk of contracting HBV. Those who are frequently exposed to infected blood or body fluids are at high risk of infection. These groups are:

- Persons in occupations that are exposed to blood or blood products – health care workers, embalmers, and emergency workers
- Sexually active homosexual or bisexual men
- Heterosexuals with multiple partners or a recent history of a sexually transmitted disease
- Injection drug users who share infection equipment
- Those receiving blood or blood products
- Household and sexual contacts of HBV carriers
- People from areas where HBV is very common

Is there a test to show I have had HBV?

There is a simple blood test. It reveals if a person has had the disease and developed antibodies or if the person still has the virus in the body.

Symptoms of HBV

The incubation period of HBV is 45 – 160 days. Only 50 percent of people who are infected have symptoms. They may or may not experience flu-like symptoms lasting up to 3 months. These include fever, jaundice, tiredness, and tenderness in the upper abdomen.

Ninety percent of those infected recover completely from the disease. One percent can die from an acute case. Nine percent of cases go on to be chronic carriers. They are infectious for life, and may not know they are infectious. This group is at very high risk for developing liver disease and liver cancer.

Treatment

There is currently no cure or treatment for acute HBV. For those who become chronic carriers, **Interferon A** may be offered as treatment. This is a very costly treatment, which has only limited effectiveness. There are other treatments being developed and researched.

Vaccination and Prevention

There are two vaccines available in Ontario to prevent infection with HBV. The vaccine is given at 0, 1, and 6 month intervals. It is very safe and over 90 percent effective. The vaccine is free to certain high-risk groups and to all Grade 7 students. Local Public Health Departments will be able to indicate those eligible for free vaccine.

Hepatitis B Immune Globulin (HBIG)

It may be offered in needlestick or other high-risk exposures, but should be given within 48 hours after exposure.

In order to protect babies from being infected, all infants born to infected mothers should be given HBIG as soon as possible, within the first few hours of birth since efficacy decreases sharply after 48 hours. Also, the initial dose of the 3 doses of Hep B vaccine should be given as soon as possible, but no later than 7 days after birth.

Protection

Treat all blood and body fluids as potentially infectious. Use routine practices whenever you are in contact with body fluids. Use 1 part bleach to 10 parts water to sterilize any nondisposable equipment that has been in contact with patient/client body fluids.

Those who are infectious need to protect their sexual partners by using latex condoms during sexual intercourse. Drug users should not share their needles, spoons and other drug use equipment.

*Hepatitis B is a reportable disease
The Public Health Department must be notified so
appropriate case and contact follow up is done*