

Iowa Perinatal Hepatitis B Prevention Program

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What is Perinatal Hepatitis B?

- ▶ Hepatitis B Virus (HBV) is a liver infection that can be transmitted from a HBV positive mother to her infant at birth. Approximately 90% of infected infants become chronically infected. (CDC)
- ▶ Without post exposure immunoprophylaxis, an estimated 40% of infants will develop chronic HBV infection. Of these infants, 25% will eventually die from chronic liver disease. (CDC)
- ▶ Vertical transmission continues from generation to generation unless there is intervention.

Goal of the Program

Prevention of perinatal transmission of hepatitis B virus through timely vaccination and case management.

Post-exposure prophylaxis (HepB vaccine + HBIG at birth, completion of HepB vaccine series, post-vaccination testing for outcomes) of infants born to infected mothers is 85-95% effective when started within 12 hours of birth.
(Immunization Action Coalition)

How Does a Case Start?

- ▶ Hepatitis B is a reportable disease in Iowa
 - ▶ Health care provider/lab required to report to IDPH.
 - ▶ Local public health agency (LPHA) receives email alert via Iowa Disease Surveillance System (IDSS) of a case. LPHA completes follow-up investigation on case including determination of pregnancy status.
 - ▶ LPHA notifies IDPH Perinatal Hepatitis B Coordinator of pregnant cases.

LPHA Role Pre-Delivery

- ▶ When completing case investigation:
 - ▶ Provide education on HBV, including infant vaccination recommendations and post-vaccination serology.
 - ▶ Contact hospital/OB provider to ensure arrangements for HepB vaccine and HBIG are in place at delivery.
 - ▶ Plan to follow-up with mother/OB provider near estimated date of delivery.

LPHA Role Post-Delivery

- ▶ Follow-up with case (mother) around estimated date of delivery. Create new case in IDSS for the infant (hepatitis B perinatal) if one does not already exist. Alert IDPH Perinatal Hepatitis B Coordinator of birth.
- ▶ Alternatively, IDPH Perinatal Hepatitis B Coordinator may receive notification of birth via vital records and will create case for infant in IDSS. LPHA will be notified to begin follow-up on infant's case.

LPHA Role Post-Delivery cont.

- ▶ Contact birth hospital for stats of baby including date and time of birth, birthweight, HBIG and HepB vaccine administration dates and times. (Important to know exact time vaccines administered-CDC recommendation is within 12 hours of birth)
- ▶ Complete as much information in IDSS as possible. (May also document on ‘Hepatitis B Carrier Follow Up’ form available on IDPH Immunization website.)
- ▶ Ensure on-going communication with baby’s health care provider and mother to assure completion of HepB vaccine series and post-vaccination serology testing (PVST).
- ▶ Routinely update vaccination dates, PVST results, and any other pertinent information in IDSS. Case will remain open until PVST completed.
- ▶ Contact IDPH Perinatal Hepatitis B Coordinator with questions.⁷

Resources

We are here to support you!

► **State Coordinator:**

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Bureau of Immunization and Tuberculosis

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Resources cont.

- ▶ IDPH Perinatal Hepatitis B Immunization Program:
<https://idph.iowa.gov/immtb/immunization/perinatal-hepb>
 - ▶ IDPH Perinatal Hepatitis B Program Coordinator's Guide
(provides detailed guidance for case management)
 - ▶ IDPH LPHA Perinatal Hep B Case Management Flow Chart
 - ▶ IDPH Hepatitis B Brochure
- ▶ IDPH Epi Manual: <https://idph.iowa.gov/CADE>

Thank you!