



Preventing Perinatal Hepatitis B

Guidelines for Pediatric Care Providers

From the Advisory Committee on Immunization Practices (ACIP) Recommendations, December 2005*
Endorsed by the American Academy of Pediatrics (AAP).

HEPATITIS B PROPHYLAXIS AT BIRTH

- Infants born to mothers who are hepatitis B surface antigen (**HBsAg**) **positive** should receive hepatitis B vaccine and hepatitis B immune globulin (HBIG) <12 hours of birth.
- Infants born to mothers whose **HBsAg status is unknown** should receive hepatitis B vaccine <12 hours of birth.
 - Preterm infants weighing <2,000 g should receive HBIG <12 hours of birth.
 - Term infants weighing $\geq 2,000$ g should receive HBIG as soon as possible if the mother is determined to be **HBsAg positive**, but not >7 days after birth.
- Medically stable infants weighing $\geq 2,000$ g born to **HBsAg negative** mothers should receive the first dose of hepatitis B vaccine before hospital discharge.
- Preterm infants weighing <2,000 g and born to **HBsAg negative** mothers should receive the first dose of hepatitis B vaccine 1 month after birth.
- Single-antigen hepatitis B vaccine must be used in infants <6 weeks of age.

AFTER THE BIRTH DOSE

- All infants should complete the hepatitis B vaccine series using either single-antigen or combination vaccine, according to the recommended vaccination schedule (see the December 2005 ACIP Recommendations, Tables 3 and 4 for details).*
- The last dose in the vaccine series should not be administered before age 24 weeks (164 days).

POST VACCINE SEROLOGIC TESTING

- Infants of HBsAg-positive mothers should be tested for both HBsAg and antibody to HBsAg (anti-HBs) 1-2 months after completing the vaccine series, but not before 9 months of age. Note: testing that is delayed after series completion can lead to falsely negative anti-HBs test results.
- Testing should be performed using a method that allows determination of a protective level of anti-HBs, i.e., ≥ 10 mIU/ml.
- HBsAg-negative infants with anti-HBs levels <10 mIU/mL should be revaccinated with a second three-dose series and retested 1-2 months after the last dose of vaccine.
- HBsAg positive infants should receive appropriate medical follow-up and should be reported to the local health department as a perinatal hepatitis B case.

* A Comprehensive Immunization Strategy to Eliminate Transmission of Hepatitis B Virus Infection in the United States, Recommendations of the Advisory Committee on Immunization Practices (ACIP) Part 1: Immunization of Infants, Children, and Adolescents, MMWR, December 23, 2005 / 54(RR16);1-23 http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5416a1.htm?s_cid=rr5416a1_e