







What is hepatitis B?

- Hepatitis B is a liver disease caused by hepatitis B virus (HBV).
- Infants and young children are mostly asymptomatic when newly infected with HBV, while 30 50% of older children or adults with acute hepatitis B may develop symptoms that are undistinguishable from hepatitis of other causes, such as fever, fatigue, loss of appetite, nausea, vomiting, upper abdominal discomfort, tea-coloured urine and jaundice (yellowing of the skin and the whites of eyes).
- Some people fail to clear the virus and develop **chronic hepatitis B infection**. The younger a person is when infected with HBV, the higher the risk of developing chronic infection.
 - Some 90% of newborn babies infected with HBV would develop chronic hepatitis B (CHB)
 - About 5% of HBV infection acquired in adulthood would lead to CHB
- Over time, about 15 40% of people with CHB could develop cirrhosis and liver cancer. They may remain asymptomatic until signs and symptoms develop secondary to serious liver damage.



infection





hepatitis





cancer

Live

- About 80% of liver cancer patients in Hong Kong are infected with HRV
- Since 1988, universal childhood hepatitis B vaccination programme has been implemented in Hong Kong, greatly reducing the risk of HBV infection.

How is HBV transmitted?

Mother-to-child transmission (MTCT)

HBV can be transmitted from mothers with CHB to their babies during delivery. In endemic places, most persons with CHB acquired HBV infection by MTCT.



Contact with blood or body fluids of an infected person



Contact with an infected person's blood or body fluids through broken skin, or mucosal membranes of the eyes or mouths



Sharing injection instruments for drug injection



Using contaminated instruments for ear-piercing, tattooing or acupuncture



Sharing personal items, which may be contaminated with blood, such as razors, shavers and nail trimmers



Reusing inadequately sterilised medical equipment



Transfusion of contaminated blood or blood products

Sexual contact

Unprotected sexual contact with an infected person



HBV is **not** transmitted through breastfeeding or social contact, such as sharing eating utensils, dining together, hugging, shaking hands and kissing.

Persons at higher risk of HBV infection should get tested

Persons considered **at higher risk of infection** include:

- Family members (such as parents, siblings and offspring) and sexual partners of people with CHB
- People who inject drugs
- Men who have sex with men
- HIV-positive people
- People who receive blood or blood products on a regular basis
- People on dialysis
- Healthcare workers who may have occupational exposure to blood or body fluids of patients

The test generally consists of blood tests on **hepatitis B** surface antigen (HBsAg) and **hepatitis B** surface antibody (anti-HBs) for assessing hepatitis B infection and immune status respectively.

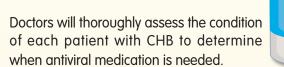


Test results		Clinical intermediation
HBsAg	anti-HBs	Clinical interpretation
Positive (+)	Negative (–)	 Infected with HBV Should seek medical consultation as early as possible Persistence of HBsAg for more than 6 months indicates chronic HBV infection
Negative (–)	Positive (+)	No HBV infectionHave adequate protective antibodies against HBV infection
Negative (–)	Negative (–)	No HBV infectionNot immune to HBV infection and may

consider hepatitis B vaccination

How to treat HBV infection?

Antiviral medication is effective in inhibiting HBV replication and reducing the risk of cirrhosis, liver failure and liver cancer.





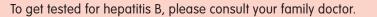
Patients with CHB should have regular medical followup and relevant investigations, such as blood test for liver function, alpha-fetoprotein and viral load, and ultrasonographic abdominal examination, for early detection and management of changes in the liver condition.

How to prevent HBV infection?

Receive hepatitis B vaccination to acquire immunity against HBV infection



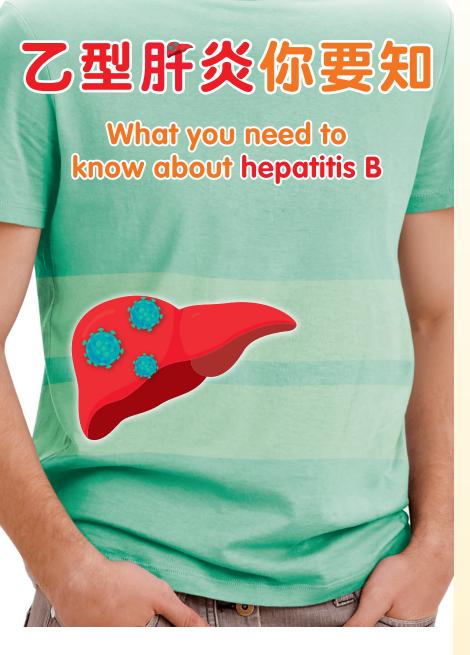
- Wear gloves while handling open wounds with care and bandage them properly
- Do not share personal care items which may be contaminated with blood, such as razors and nail scissors
- Do not share needles or any other injecting equipment
- Practice safer sex and use condom properly
- Wear gloves and use household bleach to disinfect items contaminated by blood or body fluids





Viral Hepatitis Control Office Special Preventive Programme Department of Health July 2022











甚麼是乙型肝炎?

- ▼ 乙型肝炎是由乙型肝炎病毒引起的肝臟疾病
- 大多數新感染乙型肝炎的嬰兒和幼童都沒有明顯 症狀, 而較年長的兒童或成人則有30-50%會 出現與其他肝炎相類似的症狀,例如:發燒、 疲倦、食慾不振、噁心、嘔吐、上腹部不適、 茶色小便及黃疸(皮膚和眼白發黃)
- 部分患者未能清除病毒而發展為慢性乙型肝炎 **感染**,受感染時的年齡愈小,風險愈高
 - ▼ 若初生嬰兒受到感染,有九成機會發展為 慢性乙型肝炎
 - 患者
- 約 15 40% 的慢性乙型肝炎患者長遠會出現 肝硬化或肝癌,患者可持續沒有症狀,直至肝臟 受嚴重損害後才出現徵狀



乙型肝炎

病毒感染

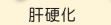








慢性肝炎



- 香港的肝癌病人中,約八成屬乙型肝炎患者
- 自一九八八年起,香港實施兒童普及乙型肝炎 疫苗接種計劃,能大大減低感染乙型肝炎病毒 的風險

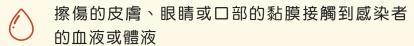
乙型肝炎是怎樣傳播?

母嬰傳播

患有乙型肝炎的母親於分娩期間可把病毒 傳播給嬰兒,在慢性乙型肝炎流行的地區 大部份患者是經母嬰傳播感染乙型肝炎



接觸感染者的血液或體液





與他人共用針筒



用未經妥善消毒的器具穿耳、紋身、針灸等



共用剃刀、指甲鉗等有機會受血液污染的用具



使用未妥善消毒之醫療器械



輸入受污染的血液或血液製品

性接觸

在沒有使用安全套的情况下和感染者 進行性接觸



乙型肝炎病毒不會經母乳餵哺或一般計交接觸 (如共用食具、共膳、擁抱、握手及接吻等) 而傳播

較高感染風險的人士應進行 乙型肝炎測試

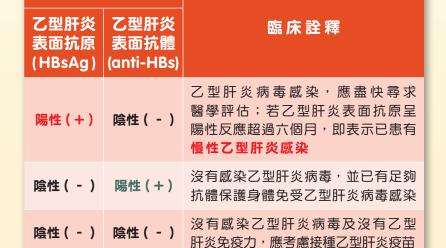
被視為較高感染風險的人士包括:

- 慢性乙型肝炎患者的家庭成員(如父母、兄弟 姊妹及子女)和性伴侶
- 注射毒品人士
- 男男性接觸者
- 愛滋病病毒感染者
- 經常接受血液或血液製品的人士
- 洗腎人士

測試結果

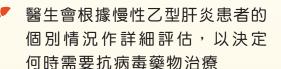
◆ 工作上會接觸病人血液或體液的醫護人員

測試一般包括乙型肝炎表面抗原 (HBsAg) 和 乙型肝炎表面抗體 (anti-HBs) 的血液測試, 以分別評估乙型肝炎感染及免疫情况



如何治療乙型肝炎?

抗病毒藥物能有效抑制乙肝病毒 複製,減低患上肝硬化、肝衰竭 及肝癌的風險





慢性乙型肝炎患者須**定期覆診**及進行相關檢查 如抽血檢驗肝功能、甲胎蛋白及病毒量,及進行 肝臟超聲波檢查,以及早察覺及處理肝臟的變化

如何預防感染乙型肝炎病毒?

₩ 接種乙型肝炎疫苗,保護身體免受 乙型肝炎病毒感染



- **虑理任何皮膚損傷時應戴上手套,並妥善包紮**
- 切勿與別人共用剃刀、指甲鉗等有機會受血液 污染的用具
- 切勿與他人共用針筒針咀或其他注射用具
- 採取安全性行為和正確使用安全套
- 處理受血液或體液污染的物品時應戴上 手套,及使用家用漂白水消毒

如欲進行乙型肝炎測試,請諮詢家庭醫生



www.hepatitis.gov.hk

特別預防計劃 控制病毒性肝炎辦公室 2022年7月

