

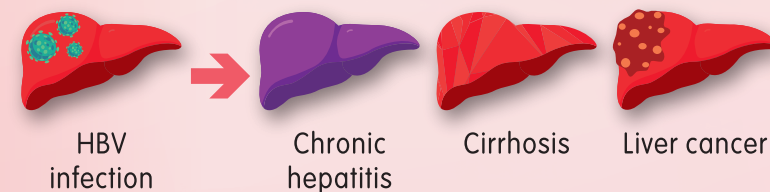
預防乙型肝炎母嬰傳播

Prevent Mother-to-child Transmission of Hepatitis B



Hepatitis B

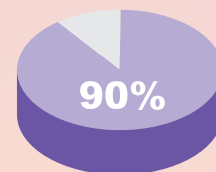
- Hepatitis B is a liver disease caused by hepatitis B virus (HBV) infection.
- Some people fail to clear the virus and develop **chronic hepatitis B (CHB)**. The younger a person is when infected with HBV, the higher the risk of developing chronic infection.
- About 15 - 40% of untreated people with CHB could develop **cirrhosis** and **liver cancer**.



- All pregnant women should receive blood testing for hepatitis B during antenatal check-up, in order to know their hepatitis B infection status.

Babies born to mothers with CHB are at higher risk of infection

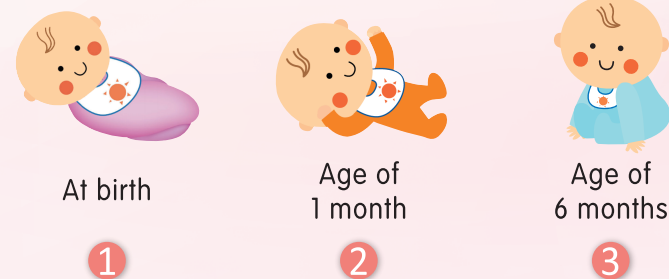
- HBV can be transmitted from mothers with CHB to their babies during normal spontaneous delivery or Caesarean section.
- Up to 90% of newborn babies infected with HBV would develop CHB.



How to protect babies from infection?

Hepatitis B vaccine

- Regardless of the hepatitis B status of mothers, all babies should receive a three-dose course of hepatitis B vaccination.



Post-vaccination serologic test

- Babies born to mothers with CHB should receive post-vaccination serologic testing to assess their immune response to vaccination and hepatitis B infection status.

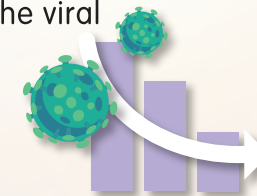


Hepatitis B immunoglobulin

- Babies born to mothers with CHB must also be given hepatitis B immunoglobulin within 24 hours after birth for immediate extra protection.
- However, the risk of developing CHB remains higher in babies born to mothers with higher HBV viral load.

Antiviral medication

- Pregnant women with high HBV viral load should consider taking tenofovir as antiviral prophylaxis to reduce the viral load and minimise the risk of mother-to-child transmission of HBV.



- Side effects after taking the antiviral medication are **not common**. Some reported side effects with tenofovir include gastrointestinal upset, headache, dizziness, fatigue, back pain, insomnia, itchiness, skin rash and fever. There is no evidence showing that use of antiviral would increase the risk of obstetric complications or congenital anomalies.



- Mothers with CHB can breastfeed their babies. There is no evidence of HBV transmission through breastfeeding. Although low level of tenofovir would be present in breast milk, evidence indicates that maternal use of tenofovir is safe for breast-fed babies.

- Postnatal women should receive medical assessment and subsequent management of CHB, to determine whether to continue antiviral medication.



How to protect family members from infection?

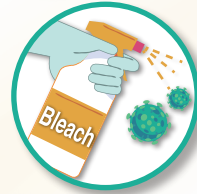
- Do not share personal care items which may be contaminated with blood, such as razors and nail scissors



- Wear gloves while handling open wounds with care and bandage them properly



- Disinfect items contaminated by blood or body fluids with household bleach and gloves on



- Practice safer sex and use condom properly during sexual intercourse



- Family members and sexual partners of people with CHB should get tested early, and consider hepatitis B vaccination if found to be non-immune and not infected with HBV



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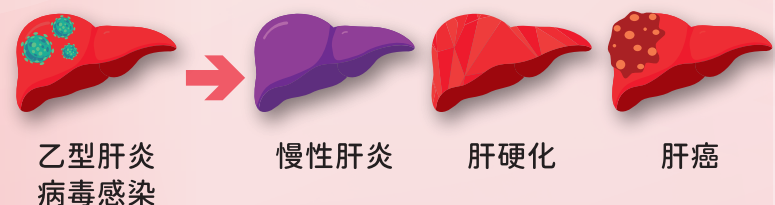
Viral Hepatitis Control Office
Special Preventive Programme
Department of Health
October 2024

預防乙型肝炎母嬰傳播

Prevent Mother-to-child Transmission of Hepatitis B

乙型肝炎

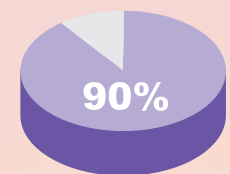
- 乙型肝炎是由乙型肝炎病毒感染所引起的肝臟疾病
- 部分患者未能清除病毒而發展為**慢性乙型肝炎**，受感染時的年齡愈小，風險愈高
- 未有接受治療的慢性乙型肝炎患者當中，約 15 - 40% 長遠會出現**肝硬化**或**肝癌**



- 所有孕婦須於產前檢查時接受乙型肝炎血液測試，以了解乙型肝炎感染狀況

患有慢性乙型肝炎母親所生的嬰兒感染風險較高

- 無論在自然分娩或剖腹生產過程中，患有乙型肝炎的母親都有機會把乙型肝炎病毒傳播給嬰兒
- 若初生嬰兒受到感染，有九成機會發展為慢性乙型肝炎



如何保護嬰兒免受感染？

乙型肝炎疫苗

- 無論母親是否患有乙型肝炎，所有嬰兒均須接種共三針的乙型肝炎疫苗



接種疫苗後血清測試

- 母親是乙型肝炎患者的嬰兒應於完成接種疫苗後接受血清測試，以評估嬰兒對疫苗的免疫反應及乙型肝炎感染狀況



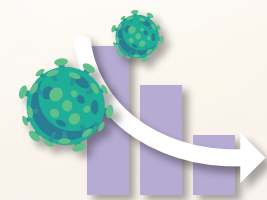
九至十二個月大

乙型肝炎免疫球蛋白注射

- 若母親為乙型肝炎患者，嬰兒須於出生二十四小時內額外接受乙型肝炎免疫球蛋白注射，以提供即時的額外保護
- 不過，若母親的乙型肝炎病毒載量較高，嬰兒成為慢性乙型肝炎患者的風險仍然較高

服用抗病毒藥物

- 若孕婦的乙型肝炎病毒載量屬高水平，應考慮服用「替諾福韋」作為抗病毒藥物預防治療以降低病毒量，將乙型肝炎病毒傳給嬰兒的風險減至最低



- 服用抗病毒藥物後出現副作用並不常見。服用抗病毒藥物替諾福韋後有機會出現胃腸不適、頭痛、頭暈、疲倦、背痛、失眠、瘙癢、皮疹和發熱等副作用。現時並沒有證據顯示服用抗病毒藥物會增加產科併發症或嬰兒先天缺陷的風險



- 患有乙型肝炎的母親是可以母乳餵哺。現時並沒有證據顯示乙型肝炎病毒可透過母乳餵哺傳播。雖然母乳中會含有少量替諾福韋，但證據顯示服用替諾福韋的母親進行母乳餵哺，對嬰孩是安全的

- 產後母親須繼續接受醫學評估及治理慢性乙型肝炎，以決定是否需要繼續服用抗病毒藥物



如何保護家人免受感染？

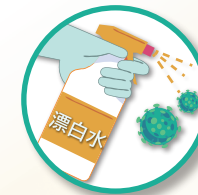
- 切勿與別人共用剃刀、指甲鉗等有機會受血液污染的用具



- 處理任何皮膚損傷時應戴上手套，並妥善包紮



- 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



- 採取安全性行為和正確使用安全套



- 慢性乙型肝炎患者的家庭成員和性伴侶應及早進行乙型肝炎血液測試，如沒有乙型肝炎抗體及未受感染，應考慮接種乙型肝炎疫苗



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