

Hepatitis B and C (PIP)

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The following guidance is taken from the Partners In Paediatrics (PIP)

Hepatitis 2018–20

HEPATITIS B AND C

Discuss all children with suspected hepatitis B or C with **regional liver unit/infectious diseases team** for counselling, information, consideration for anti-viral therapy and need for referral

HEPATITIS B

Diagnostic tests

- HBsAg, HBcAb (IgM and IgG) and HBsAb
- If HBsAg +ve then check:
 - HBeAg, HBeAb, genotype and HBV DNA PCR viral load
 - anti-HDV
 - anti-HIV
 - anti-HCV
 - anti-HAV
 - liver function tests including ALT, AST, GGT and albumin
 - refer to **regional liver unit/infectious diseases team** and notify Public Health England
- Serological markers:
 - HBsAg: infected
 - HBsAb: immune
 - HBcAb-IgM: acute infection
 - HBcAb-IgG: past infection (>6 months)
 - HBeAg: high risk viral replication
 - HBeAb: partial sero-conversion
 - HBV DNA quantitation: level of virus
 - HBV genotype: distribution based on geographical location (subtypes A–G)
 - may be responsible for variations in clinical outcomes and response to antiviral treatment, but not used to determine initial treatment of HBV

Who to screen

- Close contacts of people with confirmed acute and chronic hepatitis B infection
- Migrants from highly endemic areas
- Infants born to hepatitis B positive women **when completed vaccination course** at aged 12 months

Follow-up of HBsAg +ve children

- HBeAg -ve/HBeAb +ve: yearly
- HBeAg +ve: 6 monthly
- Abnormal liver function tests: 3 monthly

Assessment during follow-up

- Clinical assessment
- Serology (clotted specimen): HBsAg, HBeAg, HBeAb
- Hepatitis B DNA PCR viral load (EDTA)
- LFT (bilirubin, ALT/AST, ALP, albumin)
- GGT
- FBC
- Coagulation (INR, PT, PTT)
- Alpha-fetoprotein
- Abdominal ultrasound **every 5 yr**
 - if family history of hepatocellular carcinoma or rise in alpha-fetoprotein, **yearly**
- Fibroscan yearly (if available)

Action

- If LFT or alpha-fetoprotein abnormal, or viral titres are rising, inform **regional liver unit/infectious diseases team** to start antiviral therapy

HEPATITIS C

Diagnostic tests

(For neonates see **Neonatal** guidelines)

- Hepatitis C Virus (HCV) antibody aged >18 months
- HCV PCR if HCV antibody +ve

Who to screen

- Children of women found to be infected with hepatitis C
- Close contacts of people diagnosed with hepatitis C
- Migrants from highly endemic areas

Action

- If HCV Ab -ve, not infected. Discharge
- If HCV Ab +ve and HCV PCR negative in 2 samples taken 6 months apart, not infected (resolved infection or maternal antibody if aged <18 months). Discharge
- If HCV PCR +ve, check genotype, refer to regional liver unit/[infectious diseases team for treatment](#)

Yearly follow-up [in untreated patients](#)

- Clinical assessment
- HCV PCR viral load (EDTA)
- LFT (bilirubin, ALT/AST, ALP, albumin)
- GGT
- FBC
- Coagulation (INR, PT, PTT)
- Alpha-fetoprotein
- Abdominal ultrasound [at diagnosis and every 5 yr](#)
- Fibroscan [annually](#) (if available)