Epidemiology of HBV Infection and Prevention Programs

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Outline

- Clinical features
- Screening and diagnostic markers
- Epidemiology
- Progress in prevention



Features of Hepatitis B Virus Infection

Incubation period

Acute illness (jaundice)

Case fatality rate Chronic infection

Chronic hepatitis66%Premature mortality from CLD15%-25%

Average 8-12 weeks Range 6-26 weeks 10% <5 yrs old 30%-50% >5 yrs old 0.5% - 1%30%-90% <5 yrs old 2%-6% >5 yrs old 15%-25%



Markers of HBV Infection

Serologic

- HBsAg and anti-HBs
- Anti-HBc (HBcAg does not circulate in serum)
- HBeAg and anti-HBe
- Nucleic acid
 - HBV DNA



Course of HBV Infection HBsAg

- Appears average of 6-8 weeks after exposure
 - 1-3 weeks before ALT becomes abnormal
 - 3-5 weeks before onset of symptoms or jaundice
- Reaches peak during acute stage of infection
- Declines to undetectable levels within 4-6 months indicating recovery
- Usually remains detectable in chronically infected persons
- Marker for transmission studies



Course of HBV Infection HBV DNA

- Detected 2-5 weeks after infection and up to 40 days before HBsAg (mean of 6-15 days)
- Rises slowly at relatively low levels during seronegative period
- Also detected during chronic infection



Course of HBV Infection Anti-HBc

- Appears after HBsAg, at onset of ALT abnormality
 - Predominantly IgM class
- Remains detectable lifelong
 - Predominantly IgG after 6 months
- Present in both resolved and chronic infections
- Isolated anti-HBc
 - 2% of asymptomatic persons tested for HBV
 - Frequency directly related to frequency of infection
 - HBV DNA detected in <10%</p>



Course of HBV Infection Anti-HBs

- Neutralizing antibody
- Develops during recovery
 - Detectable along with anti-HBc
 - May become undetectable in up to 20% of patients after several years
- Detected alone after immunization
 - Becomes undetectable in 40% of persons by 5 years after vaccination, but protection continues



Interpretation of HBV Serologic Tests

HBV

DNA	HBsAg	Anti-HBc	Anti-HBs	Interpretation
-	-	-	-	Susceptible
+	-	-	-	Early acute, pre-seroconversion
+	+	-	-	Early acute infection
+	+	+	-	Acute or chronic infection
-	-	+	+	Recovered/immune
+	+	+	-	Chronic infection



Interpretation of HBV Serologic Tests

HBV

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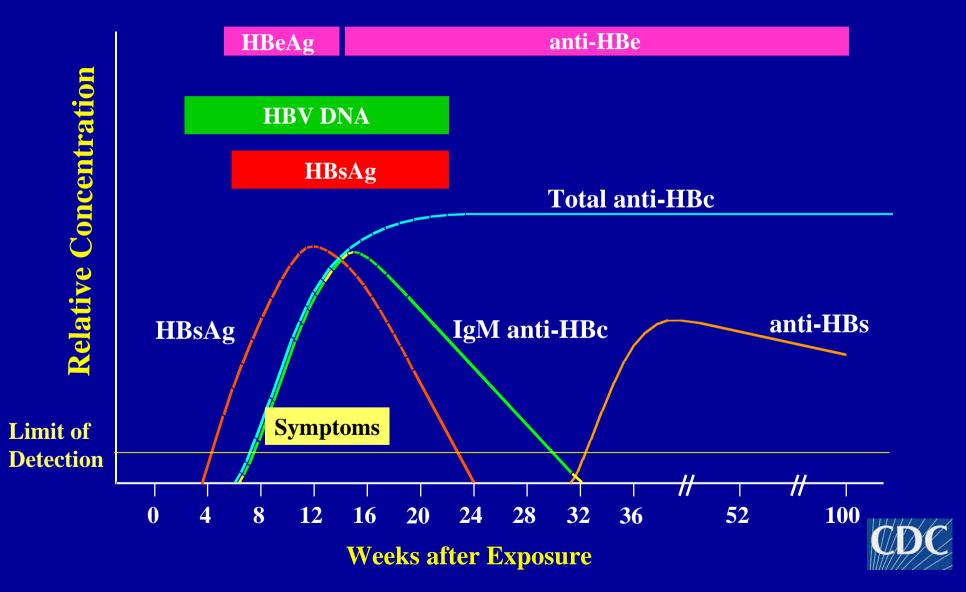
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DNA	HBsAg	Anti-HBc	Anti-HBs	Interpretation
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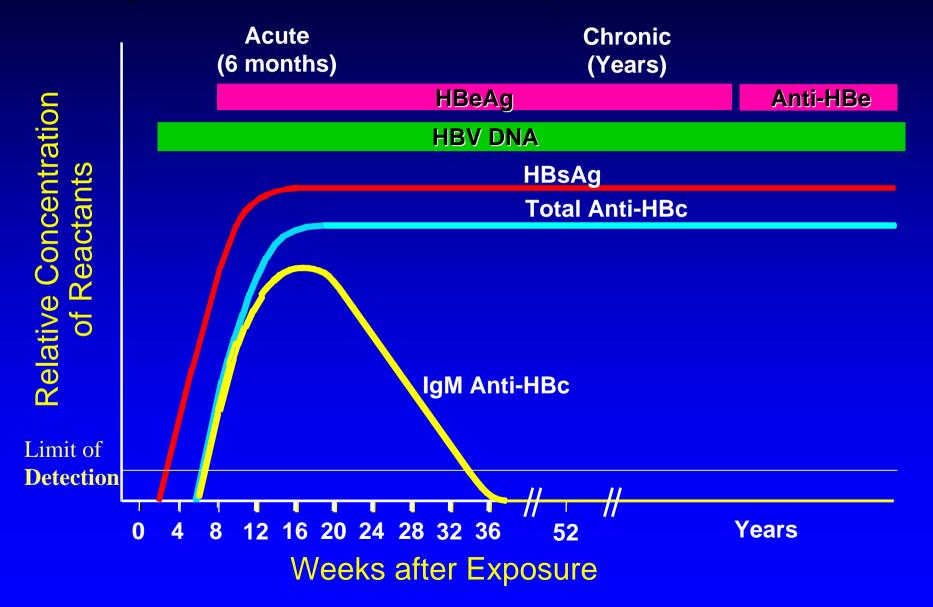
- Resolving infection, past infection, "low-level" chronic infection, or false positive
- Immune if >10 mIU/mL
- Transient (<21 days) during vaccination



Acute HBV Infection with Recovery



Progression to Chronic Hepatitis B Virus Infection



Hepatitis B Virus Infection, United States

73,000 **Newly acquired infections** 21,000 **Acute cases Deaths from acute liver failure** 290 4,400 **Chronic infections** 4.9% **Persons ever infected (1990) Persons with chronic infection** 1.25 million 4% - 14% **HBV-related chronic liver disease** 3,000-5000 **Deaths from chronic disease/year**



Modes of HBV Transmission

Exposure to Blood or Body Fluids Containing Blood

• Percutaneous

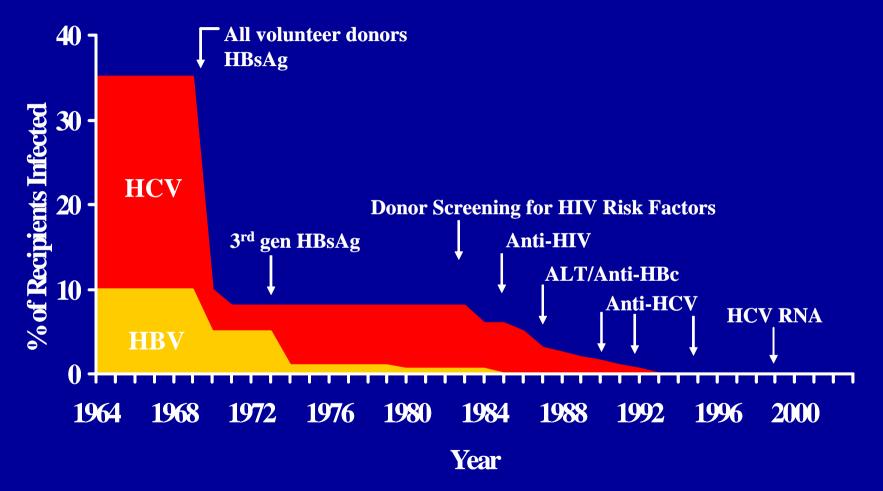
- Injecting drug use
- Occupational, household (needle stick, non-intact skin)
- Therapeutic (contaminated equip, unsafe injections)
- Transfusions and transplants from infectious donors

Permucosal

- Sex with infected partner
- Birth to infected mother (perinatal)
- Household (exposure to infected contact)



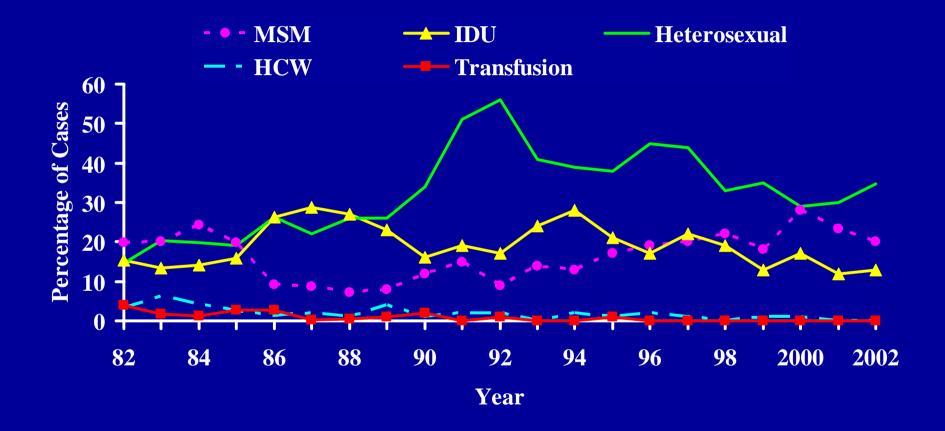
Posttransfusion Hepatitis





Adapted from HJ Alter

Reported Cases of Acute Hepatitis B by Selected Risk Factors, Sentinel Counties, United States, 1982-2002



Source: Goldstein S et al. JID 2001; 185:713-719 and CDC, unpublished data



Patients with Acute Hepatitis B Transfused During Exposure Period, 1982-2003, Sentinel Counties

• 51 reported - 8 with other risk factors

- 2 IDUs, 3 infected sex partners, 3 multiple partners
- 43 reported no other risk factors
 - 34 (79%) 1982-1988
 - 6 (14%) 1989-1993
 - -3(7%) 1994-1998
 - Follow-up testing of donors HBV seronegative
 - All 3 cases hospitalized during incubation period
 - 1 for entire 6 months prior to onset of illness



Nosocomial Transmission of HBV

- Rare relative to other sources for infection
 - Recognized primarily in context of outbreaks
- Unsafe injection practices
 - Spring loaded finger stick devices
 - Multiple dose medication vials
 - Therapeutic injections
 - Contaminated jet injector
 - Re-use of needles and syringes
 - Contaminated medication preparation area



Cases of Acute Hepatitis B Reporting Transfusion Enhanced Surveillance, NNDSS, 2003

Total cases reported	7, 381
Reported transfusion	49
Not acute hepatitis	(15)
Never transfused	(13)
Transfused >6 months ago	(11)
Acute cases transfused	10
Donor infected	1*
*Single donor pre-seroconversion	

*Single donor pre-seroconversion

Source: National Notifiable Diseases Surveillance System, CDC, unpublished

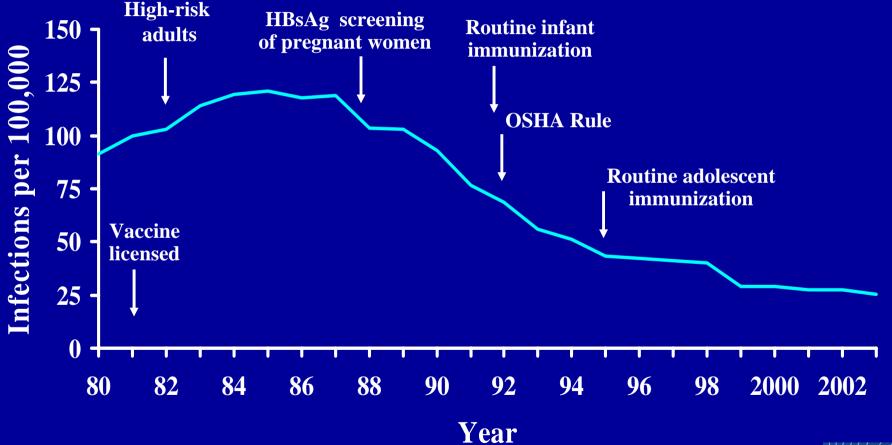


HBV Prevention and Control

- Donor screening and testing
 - At least 50% of acute HBV infections have histories deferred by screening
- Infection control
- Preexposure vaccination
 - Infants, children, adolescents
 - Adults at high-risk
- Postexposure prophylaxis (vaccine, HBIG)
 - Infants born to infected mothers
 - Screen all pregnant women for HBV
 - Ensure all newborns receive first vaccine dose
 - Occupational exposures
 - Sex and household contacts of HBsAg-positives
- Harm reduction counseling and services



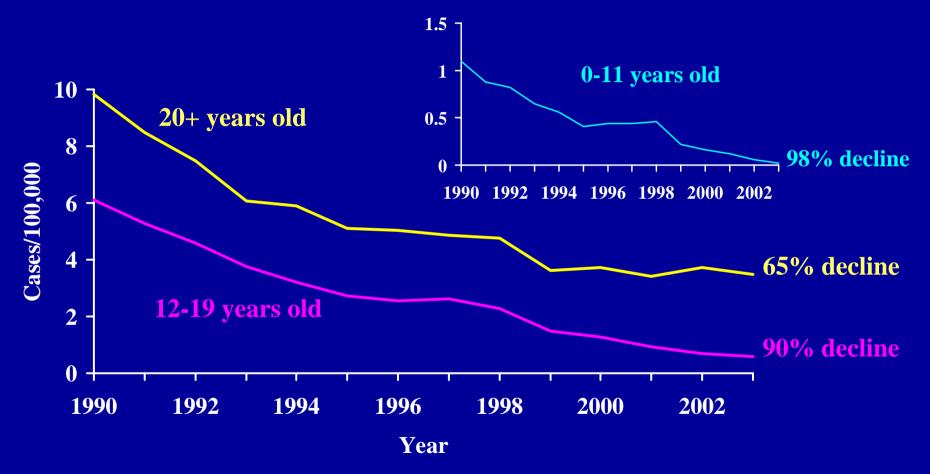
Estimated Incidence of Acute HBV Infection United States, 1980-2003



Updated 8/04



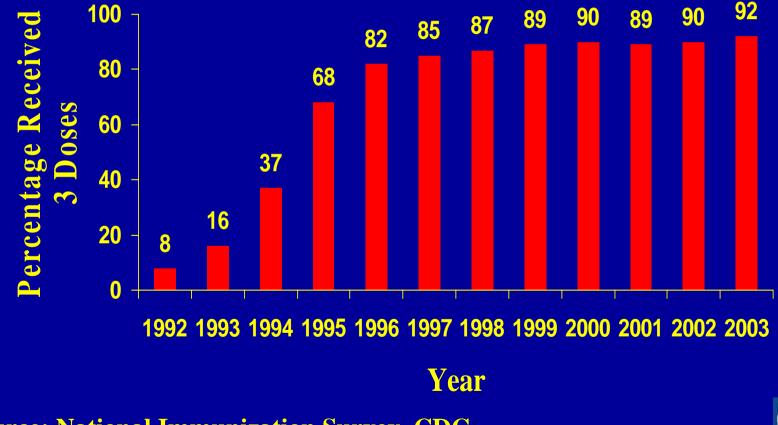
Incidence of Acute Hepatitis B by Age, United States, 1990-2003



Source: CDC, National Notifiable Diseases Surveillance System (NNDSS)



Hepatitis B Vaccine 3 Dose Coverage Among 19-35 Month Old Children, by Year of Survey, 1992-2003



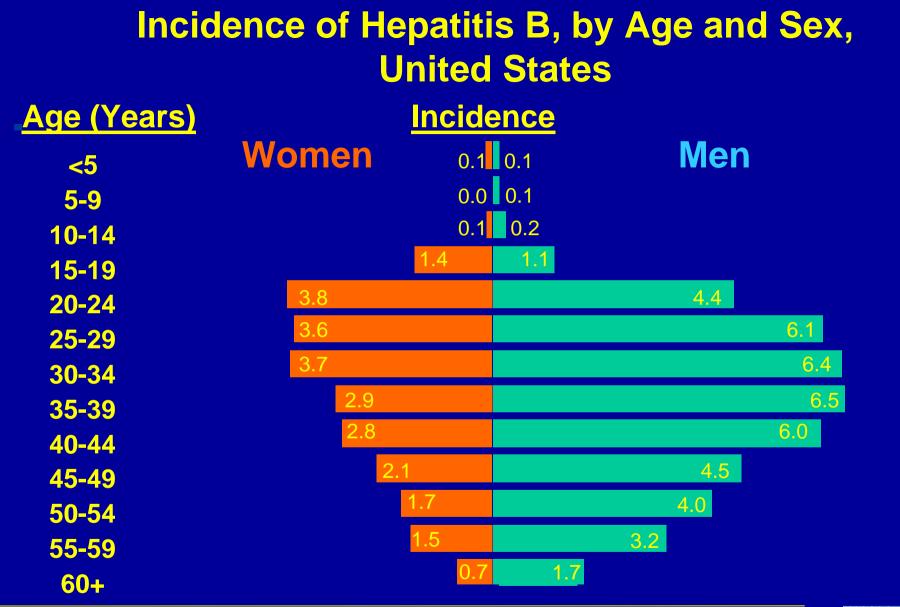
*Source: National Immunization Survey, CDC



Immunity to HBV Infection Among Adolescents and High-Risk Adults

- Adolescents 13-15 years old 60% vaccinated
- General population adults (30-60 years old)
 - Natural immunity
 - Whites 4%
 - Blacks 15%
 - Asians 60-80%
- High-risk adults vaccinated
 - HCWs and PSWs 70%-80%
 - IDUs, MSMs, STD clients, inmates <10%</p>

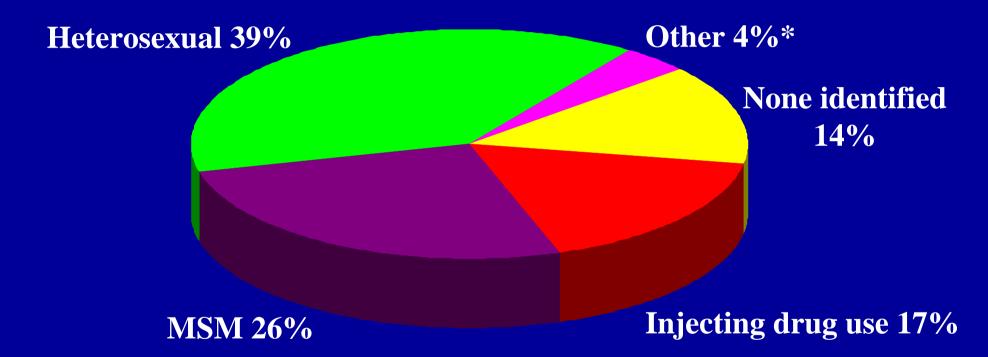




Source: National Notifiable Diseases Surveillance System (NNDSS)



Reported Risk Factors for Acute Hepatitis B United States 2000-2003



* Other - Household contact, occupational exposure, hemodialysis, institutionalization, transfusion

Source: Adapted from Sentinel Counties and NNDSS, CDC



Acute Hepatitis B Cases Which Could Have Been Prevented if Vaccination Offered as Recommended

Prior Opportunity

Percent of Cases

Known infected contact9%History STD rx or incarceration55%Total64%

Source: Goldstein ST et.al., JID 2002;185:713-9



Elements of a Successful Vaccination Program

	Present in	
	Childhood	Adult
Elements Required for Success	<u>Program</u>	<u>Program</u>
Evidence-based recommendations	X	X
Implementation strategy/partners	Χ	X
Provider/patient education	Χ	X
Vaccine purchase	Χ	
Infrastructure for vaccine delivery	7 X	ØDC

A National High-Risk Adult Hepatitis B Immunization Program

- Integrate vaccination into existing public health and correctional health programs
- Strengthen infrastructure to deliver vaccine
- Purchase vaccine
- Further determine methods to improve vaccination coverage

