Screening for Hepatitis B Virus Infection in Non-Pregnant Adolescents and Adults

The U.S. Preventive Services Task Force (Task Force) has issued a draft recommendation statement on Screening for Hepatitis B Virus Infection in Non-Pregnant Adolescents and Adults.

This draft recommendation statement applies only to teens and adults who are at high risk of becoming infected with hepatitis B. Within this group, the draft recommendation applies to those who do not have signs or symptoms of hepatitis B infection and who have not already been vaccinated against the virus. It does not apply to pregnant teens or adult women.

The draft recommendation statement summarizes what the Task Force learned about the potential benefits and harms of screening for hepatitis B:

People who are at high risk of infection should be screened.

Hepatitis B is one of several viruses that can damage the liver. The virus is spread through contact with infected blood or body fluids. Hepatitis B can be transmitted from an infected mother to her baby at birth. It can also be transmitted through sex with an infected person or by sharing injection drug equipment.

Facts about Hepatitis B Infection

Hepatitis B infection is not very common in the overall U.S. population. However, it is more common among certain high-risk groups. These groups include:

- People who were born in countries where hepatitis B is common
- People who were not vaccinated against hepatitis B when they were babies and whose parents came from countries where hepatitis B is common
- People with HIV infection
- Injection drug users
- People living with or having sex with people infected with hepatitis B
- Men who have sex with men
- Patients who have a weakened immune system or undergo treatment for kidney failure (hemodialysis)
Many times, when people become infected with hepatitis B, they have no signs or symptoms of the infection. They can spread the virus to others without knowing it. Most of those who get the infection recover fully and develop immunity against the virus. They cannot pass on the virus to anyone else once they have recovered.

Some people, however, do not completely get rid of the virus. It remains in their body for the rest of their lives. This is called chronic hepatitis B infection and people who have it can infect others. It is thought that about 1 million people in the United States have chronic hepatitis B infection.

About 15% to 25% of people with chronic hepatitis B infection develop serious liver problems, including cirrhosis (scarring) of the liver, liver cancer, or liver failure. These liver problems can take decades to develop, and people may have no signs or symptoms that the damage is occurring.

Hepatitis B can be prevented with vaccination. This vaccination is very effective, and in the United States it is recommended for all babies, anyone younger than 19 who did not get vaccinated as a baby, and adults who are at high risk for getting the infection.

**Facts about Hepatitis B Infection**

Screening for chronic hepatitis B infection involves a simple blood test that looks for a series of antibodies (disease-fighting proteins).

Treatment for chronic hepatitis includes regular monitoring by a health care professional and sometimes antiviral medicines (medicines that slow down the virus).

**Potential Benefits and Harms**

The Task Force reviewed studies on the benefits and harms of screening for and treatment of hepatitis B infection.

The Task Force found that screening tests accurately identify people who are or who have been infected with hepatitis B. Earlier detection could help prevent complications and reduce the spread of the infection. Treatment with antiviral medicines may reduce the risk of developing liver cancer. The Task Force also found that HBV vaccination is effective for decreasing the spread of the disease.

The Task Force found that hepatitis B screening has some potential harms, including anxiety or feelings of stigma. Hepatitis B treatment has side effects, including tiredness, nausea, headache, and joint and muscle pain. These side effects usually go away after treatment ends.

While screening and treatment can be effective, it is important to remember that Hepatitis B infection is not common in the general U.S. population, and most infected individuals do not develop complications.

**The Draft Statement on Screening for Hepatitis B Infection: What Does It Mean?**

Here is the Task Force’s draft recommendation on screening for hepatitis B. It is based on the quality and strength of the evidence about the potential benefits and harms of screening for this purpose. It also is based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When the Task Force recommends screening (**Grade B**), it is because it has more potential benefits than potential harms. The Notes explain key ideas.

Before you send comments to the Task Force, you may want to read the full draft recommendation statement. The statement explains the evidence the Task Force reviewed and how it decided on the grade. An evidence report provides more detail about the studies the Task Force reviewed.
The Task Force recommends screening for hepatitis B virus infection in persons at high risk for infection. Grade B

Notes

1 screening
Testing a blood sample to determine whether a person is infected with hepatitis B now or was infected in the past.

persons at high risk
People who are more likely to get infected or to pass on the infection. Within this group, this draft recommendation statement focuses on people who do not have signs and symptoms of hepatitis B infection and who have not already been vaccinated. It does not apply to pregnant teen and adult women.

Click Here to Comment on the Draft Recommendation

The Task Force welcomes comments on this draft recommendation.

Comments must be received between February 11 and March 10, 2014.

All comments will be considered for use in writing final recommendations.
What is the U.S. Preventive Services Task Force?

The Task Force is an independent group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, or preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a draft recommendation statement. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the Task Force Web site.

### USPSTF Recommendation Grades

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<th>Grade</th>
<th>Definition</th>
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<tr>
<td>A</td>
<td>Recommended.</td>
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<td>B</td>
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<td>Recommendation depends on the patient’s situation.</td>
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<td>D</td>
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<td>I statement</td>
<td>There is not enough evidence to make a recommendation.</td>
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