

CAN I HAVE CHILDREN?

Yes. If you are pregnant and have hepatitis B, your baby will receive protection with HB immuno-globulin and hepatitis B vaccination directly after birth (overall 99 per cent effective).

If you have very high amounts of hepatitis B virus in your blood, then the risk of infection is increased. Therefore you will also need to take tenofovir treatment during the third trimester of pregnancy to prevent transmission to the baby. You will stop this treatment about four weeks after delivery. You can still breastfeed.

HOW CAN I AVOID SPREADING THE VIRUS?

- Cover any open cuts or sores;
 - Clean any blood spillage with household bleach (do not put bleach on your skin);
 - Do not share razors, toothbrushes, nail files, or any objects that may come into contact with blood or body fluids;
 - Practise safe sex – use condoms until your partner has evidence of protective immunity;
 - Vaccination for sexual contacts and household members (free vaccine is available).
- Hepatitis B is not spread through everyday contact, eg. touching, sneezing, coughing, or using the same toilet.

TAKE CARE OF YOUR LIVER

There are a number of things you can do to stay healthy:

- Limit or avoid alcohol;
- Keep yourself within a healthy weight range by eating a well-balanced diet. Eat plenty of fruit and vegetables, and avoid fatty foods;
- Discuss the use of herbal or alternative medicines with a doctor, as some may affect your liver;
- Ensure you get regular blood tests (usually 6-monthly) to monitor your liver. Individuals who continue with regular monitoring have improved health outcomes.

SUPPORT FOR PEOPLE LIVING WITH HEPATITIS B

The Hepatitis Foundation of New Zealand has set up a confidential national follow-up and support programme designed to provide advice and support to those living with chronic hepatitis B.

This programme offers information on lifestyle and treatment, contact with a community hepatitis nurse, and blood tests as necessary.

Please contact us if you would like to register for this programme or need further information.

© Hepatitis Foundation of New Zealand 2021



**The Hepatitis Foundation of
New Zealand**

Phone: 0800 33 20 10

PO Box 647, Whakatāne,
New Zealand

www.hepatitisfoundation.org.nz

Follow us on WeChat by scanning the QR code below



Understanding chronic hepatitis B



Know it. Test it. Treat it.

WHAT IS HEPATITIS?

Hepatitis means inflammation of the liver. The virus enters the body and infects the liver; the immune system then attacks the infected liver cells, causing damage. The liver tries to heal by scarring. Over many years, this scarring worsens and can lead to cirrhosis.

In cirrhosis, the liver is small and hard. If left untreated it may lose function, leading to bleeding from the gut and liver failure.

HOW COMMON IS HEPATITIS B?

Approximately 100,000 people in New Zealand are chronically infected with hepatitis B (HBV). The highest rates are in Maori (6%), Pacific Islanders (7-14%), South East Asians and Chinese (9%). Rates of HBV in Europeans and Indians are very low (<1%). Since 1987, all babies born in NZ have been protected against HBV infection through vaccination. As a result, HBV infection is rare in New Zealanders under 25.

CHRONIC HEPATITIS B

Most adults with chronic hepatitis B were infected at birth or in early childhood. Adults with chronic hepatitis B are infected for life and have long-term risk of developing chronic liver disease, which may progress to cirrhosis, liver failure and liver cancer.

We offer free monitoring for all New Zealanders with chronic hepatitis B. This involves six-monthly blood tests to check for chronic liver disease or liver cancer.

If you have cirrhosis or if you have a close family member with chronic hepatitis B and they have been diagnosed with liver cancer, you'll need six-monthly liver ultrasounds as you have a higher risk of developing liver cancer.

IS TREATMENT AVAILABLE?

Effective treatments are available and fully funded to control chronic hepatitis B. These medicines work by stopping the virus from multiplying and are only needed in

STAGES OF LIVER DISEASE

Fibrosis (inflammation)

Scarring of the liver.

Cirrhosis (scarring)

Severe shrinkage and scarring of the liver. This prevents the liver from working properly. May lead to severe bleeding from the gut.

Liver failure

May result in death.

Liver cancer (HCC)

This can develop at any stage. Chronic hepatitis B increases your overall risk of developing liver cancer.

people with high levels of virus and liver enzymes in the blood. You should have regular blood tests every six months in order to check whether the virus has become active and whether you need treatment.

The treatment is a single tablet once a day. This has no side-effects and is perfectly safe. Once you have started on the

treatment, you will need to take it for the rest of your life. Not only will this treatment prevent further damage to the liver, it will also reverse any scarring already present. The treatment will prevent cirrhosis and the complications of liver failure and liver cancer.

HOW DO YOU CONTRACT HEPATITIS B?

Hepatitis B is spread through contact with blood or body fluids. The age of infection is important in determining whether the person gets sick and whether they can clear the infection. About 99 percent of people with chronic hepatitis B caught it as babies (from their mother during delivery) or young children (from playing with other children with the virus, or by close contact with older household members with chronic hepatitis B).

Babies and young children with hepatitis B don't get sick but they do develop chronic infection with associated lifelong risks of cirrhosis, liver failure and liver cancer. All children with the virus and adults who caught it as children) need long-term monitoring through our programme.

In contrast, when adults are infected, they usually become sick with acute hepatitis (jaundice, abdominal pain and vomiting) but adults usually get rid of the infection. They do not need any follow-up. Adults are usually infected by having unprotected sexual contact with someone who has hepatitis B. If you have a new sexual partner then he/she will be at risk of catching hepatitis B from you. He/she should be checked for immunity against hepatitis B (very likely if under 25 years as will be protected by vaccination at birth). If your partner is not immune, then he/she can receive a free HBV vaccination which will protect him/her from getting acute hepatitis B. After he/she has finished the course of vaccines (3 over 3-6 months), he/she should be tested for protective immunity against hepatitis B. Until then, you and your partner should use condoms to prevent HBV infection.

Adults can occasionally catch hepatitis B from receiving unsterile tattoos

Regular blood tests can detect active liver disease.