

#### **Appendix 4**

#### **Hepatitis B immunisation for babies born where a household contact (not the mother) has hepatitis B infection: Information for parents and carers**

We recommend immunisation against hepatitis B for all babies at risk of infection.

Babies are at risk of hepatitis B infection if they live in a household with person who is infected with hepatitis B.

The hepatitis B vaccine is safe to give to babies and can prevent them from getting the infection.

Parents and carers of babies at risk of hepatitis B can help by following the guidance in this leaflet.

#### **This leaflet provides information on:**

- **hepatitis B**
- **how to protect babies at risk of hepatitis B infection**
- **what parents and carers can do to help.**

This leaflet is about preventing hepatitis B in babies before they are exposed to any risk of infection in the home from family members or close contacts who have the infection.

All pregnant women are offered a blood test for hepatitis B. If a pregnant woman is infected with hepatitis B, her baby will be given additional treatment if required to prevent infection at birth. If this is the case, a different information leaflet will be provided – speak to your midwife to make sure you are given the right information and advice.

#### **What is hepatitis B?**

Hepatitis B is a virus that can damage the liver and is highly infectious (spread easily from one person to another).

#### **How can you get hepatitis B infection?**

The hepatitis B virus is carried in the blood and body fluids. Infection can be spread:

- From an infected 'carrier' mother to her baby during birth
- By 'household contact' e.g. sharing toothbrushes and razors, and by accidents where blood to blood contact is possible.
- By sharing injecting equipment with an infected person e.g. needles, syringes, spoons, filters, water etc.
- From infected equipment used for tattooing and body piercing;
- By unprotected sex with an infected person

**How hepatitis B is not spread**

The virus is not spread by normal day-to-day contact and activities, e.g. coughing, sneezing, hugging, holding hands, sharing bathrooms and toilets or food, cups, plates, bowls, cutlery or towels.

**Why is hepatitis B infection serious for babies?**

As many as 9 out of 10 babies infected in the first year of life develop long-lasting infection (i.e. they become a 'carrier'). These babies are likely to get serious liver disease as they grow older.

**Can my baby be protected from hepatitis B infection?**

Your baby can be protected from hepatitis B infection by a dose of hepatitis B vaccine at birth, followed by the routine childhood immunisations at 8, 12 and 16 weeks of age. If your baby is fully immunised, they have a 95% chance of being protected from hepatitis B for life.

**Is hepatitis B vaccine safe for babies?**

Millions of doses of hepatitis B vaccine have been given to babies worldwide without serious side-effects. In some babies, the site of the injection may become red, swollen and tender but this will disappear on its own.

**Why it is important for a full course of vaccine to be given?**

It is essential that your baby receives all their vaccines to be properly protected.

**When should my baby have the hepatitis B vaccine?**

Your baby should have the first dose of vaccine soon after they are born. Your midwife will discuss this with you before the baby is born and make sure your baby gets the hepatitis B vaccine in hospital. This starts to protect your baby when they are going home to a household where someone is carrying the hepatitis B infection. It is important that your baby receives their routine childhood immunisations at 8, 12 and 16 weeks in order to complete the course of vaccinations for hepatitis B.

**Does anyone else in my house need the hepatitis B?**

We recommend immunisation against hepatitis B for any adult or child living in a household with an infected person. Discuss this with your GP or other healthcare worker, who can help to arrange hepatitis B testing and immunisation of household members if required.

**If you have any other questions, talk to your GP (family doctor) or midwife.**

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