

HEPATITIS B AND THE ASIAN COMMUNITY

Why are Asians at greater risk than Non-Asians?

Asians are at greater risk because there are already more Asian people infected with hepatitis B than non-Asians. Although hepatitis B is not an "Asian disease", it certainly affects hundreds of millions of Asians. Since the Asian community starts with such a large number of infected people, there is a much higher rate of infection. For more information about hepatitis B and the Koreans community, please read "[Dr. Hann Talks About Hepatitis](#)".

How is hepatitis B spread differently among Asians than non-Asians?

Asians and non-Asians can both get hepatitis B through contact with blood, unprotected sex, shared needles, and from an infected mother to her newborn baby during delivery. Jobs and lifestyle choices can also create an equal risk for both groups.

Most Asians, however, are infected with the hepatitis B virus as infants or young children – from infected mothers who unknowingly pass the virus to their newborn babies at birth or exposure to blood from another infected child or adult with whom they live in close contact. Since babies and young children are more likely to develop chronic infections once they are exposed to the hepatitis B virus, this explains why there are so many chronic HBV carriers among Asians. In comparison, non-Asians are most commonly infected as young adults through unprotected sex. As adults, their immune systems can usually get rid of the virus and they usually recover from a hepatitis B infection.

What does it mean to be a "chronic carrier" of hepatitis B?

A person who is unable to get rid of the hepatitis B virus after six months is diagnosed as being a "chronic carrier". The virus can stay in their blood and liver for a lifetime and they can continue to pass the virus on to other people. Although many chronic carriers should expect to lead long healthy lives, they must be sure to see a doctor knowledgeable about hepatitis B (such as a "liver specialist") for regular check-ups at least once a year, or more if needed, since they live with an increased risk of developing cirrhosis or liver cancer later in life. There are simple lifestyle changes a person can make to protect the health of their liver and several new drug treatments that can benefit to those who show signs of active liver disease.

Why should Koreans be worried about chronic hepatitis B infections?

Since 1 out of 4 chronic carriers will die from cirrhosis or liver cancer later in life, it's very important to be tested for hepatitis B. Early detection of chronic hepatitis B can improve the chances of preventing and surviving liver cancer through regular medical check-ups and new drug treatments. In addition, since most chronic carriers don't even know they are infected, they can unknowingly spread the virus to their loved ones. If people are not tested, then hepatitis B will continue to pass through several generations in one family and throughout the community.

According to the Asian Liver Center at Stanford University:

- Liver cancer is the fourth most common cause of cancer among Korean-Americans
- An estimated 550,000 people in the world die of liver cancer each year
- 80% of all liver cancer in the world is caused by chronic HBV infection
- 1 out of 4 chronic HBV carriers will die from liver cancer or cirrhosis

- Liver cancer rates are 8 times higher in Korean-American men than in Caucasian-American men
- Liver cancer usually develops between 35 – 65 years of age, when people are most productive
- Some carriers can develop liver cancer as early as 30 years of age
- An estimated 360,000 deaths from hepatitis B each year are from countries in Eastern Asia alone (Korea, China, Hong Kong, and Japan)
- Approximately one million chronic carriers in the world die each year from liver cancer or liver failure due to cirrhosis (this is equivalent to 2,700 deaths/day, 114 deaths/hour, and 2 deaths/minute due to HBV!)

How can I stop the threat of hepatitis B?

The good news is that you can break the cycle of infection in your family and in the Korean community. Get tested for hepatitis B. Make sure everyone in your family is vaccinated against hepatitis B. Get the vaccine yourself. Find a good doctor who is very knowledgeable about hepatitis B. Discuss treatment options with your doctor or a liver specialist if you have already been diagnosed with chronic hepatitis B.

Is there any treatment if I have chronic hepatitis B?

Currently, there are several approved drugs in the United States for people who have chronic hepatitis B infections.

Epivir-HBV or **Zeffix** (lamivudine) is a pill that is taken orally

Hepsera (adefovir dipivoxil) is a pill that is taken orally

Intron A (interferon alpha) is a drug given by injection

It is important to know that not every chronic hepatitis B patient needs to be on medication. Some patients only need to be monitored by their doctor on a regular basis (at least once a year, or more). Other patients with active signs of liver disease may benefit the most from treatment. Be sure to talk to your doctor about whether you could benefit from treatment and discuss the treatment options. In addition, there are promising new drugs in clinical trials and in the research pipeline.

It is vital that all people with chronic hepatitis B visit their doctor on a regular basis, whether they receive treatment or not!

There are additional promising new drugs being tested and developed for chronic hepatitis B. Please visit the Hepatitis B Foundation's [Drug Watch](#) chart to find out more about new potential treatments. This chart is available only in English since the information changes so frequently.

Where can I get more information about testing, vaccination and treatment?

You can ask your family doctor, the local health department, or community health clinic to order the simple hepatitis B blood test. You can also start the vaccine series at this time.

If you need help finding a doctor or want more information, please call the HBV Information and Assistance HelpLine at **1-888-888-0981**. This is a free telephone call, which is part of a national

community program sponsored by GlaxoSmithKline. All information is available in English, Mandarin, Cantonese, Korean, and Vietnamese.

DR. HANN TALKS ABOUT HEPATITIS

“Hepatitis B & C, Liver Cancer and New Treatments” by Hie-Won Hann, M.D.

(only available in Korean – please visit the website at www.hepb.org)

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HEPATITIS B INFECTIONS

Will I feel sick if I am infected with hepatitis B?

Hepatitis B is considered a "silent infection" because most people don't have symptoms when they are first infected. When a person is first infected with hepatitis B, their bodies can react in different ways:

- Some people who are infected may have mild flu-like symptoms (fever or fatigue) that are mistaken for the flu or a bad cold.
- Others may go to a doctor because they feel more tired than usual, don't feel like eating, have an upset stomach, or complain about joint pain.
- Less common but more serious symptoms include severe nausea and vomiting, yellow eyes and skin (this is called “jaundice”), and a swollen stomach; these symptoms require immediate medical attention and a person may need to be hospitalized.

It is always a good idea to talk to your doctor if you don't feel well or if you are uncertain about whether you may have been infected with hepatitis B. Most people who are infected with hepatitis B do not even know they are infected. A simple blood test can easily diagnose a hepatitis B infection.