

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)

Hie-Won Hann, M.D., is a Professor of Medicine and Director of the Liver Disease Prevention Center of Jefferson Medical College located in Philadelphia, PA. She is a world-famous hepatitis B expert. This article is reprinted with permission by Dr. Hann and her publisher Alex Shin (Sir Speedy Printing, Philadelphia, PA 19106).

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.

What blood test should I ask my doctor to order?

Make sure that your doctor orders the hepatitis B blood test. There are 3 common tests that make up the hepatitis B blood test panel. This is a very simple blood test that can be taken in the doctor's office. If you think you have been newly infected with hepatitis B, it will take 4 -6 weeks before a blood test will be positive for the virus. A chronic hepatitis B infection will show up positive on a blood test as well.

Make sure your doctor clearly explains your blood test results so that you know whether you have hepatitis B or not. You want to know whether you have recovered from a hepatitis B infection or whether you have become chronically infected. Your doctor may check your blood again in 6 months to confirm your diagnosis. Always ask for a written copy of your blood tests. For more information about the hepatitis B blood tests, visit our [Blood Tests](#) page.

Where can I go to be tested and vaccinated?

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 hepatitis B vaccine series.

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.

What will happen if I am infected with hepatitis B?

When an adult is first infected with the hepatitis B virus (HBV), your body usually responds in three different ways:

- **Recovery** - 90% of healthy adults who are infected will "recover" and get rid of the virus within six months. When a blood test shows that the hepatitis B virus has gone and that "surface antibodies" have been made, a person is then considered to have recovered. They are no longer contagious to others. The "surface antibodies" protect them from any future hepatitis B infections. These people do not need the vaccine since they are already protected.
- **Chronic Infections** - 10% of infected adults are unable to get rid of the virus after six months. They are diagnosed as being "chronic carriers" of hepatitis B. This means that the virus can stay in their blood and liver for possibly a lifetime. People who are "chronic carriers" of HBV are able to pass the virus on to others and are at higher risk for developing cirrhosis or liver cancer later in life.
- **Acute Liver Failure** - Less than 1% of infected adults can have a severe reaction and die from liver failure within several weeks after being exposed to the hepatitis B virus. Liver failure is life-threatening and a person must receive immediate medical care. This is a very rare reaction.

What do all these numbers really mean?

Imagine you are sitting in a room. There are 100 people in this room, including yourself. The door opens and the hepatitis B virus walks in and infects everyone. You all go home. Some people may feel sick in a couple of weeks, most of you will not. Six months later, everyone is

asked to return to the room for a hepatitis B blood test. All 100 people who were infected 6 months ago will fall into one of the following groups:

- 90 people will receive the good news that they have recovered and gotten rid of the virus; they can go home.
- 9 or 10 people (maybe including yourself?) will be diagnosed as being “chronic HBV carriers” because they have been unable to get rid of the virus after six months. They are told to make simple lifestyle changes to protect their liver, to test and vaccinate their loved ones, and to find a doctor who can provide good medical care.
- Although rare, 1 person may have a severe reaction to the hepatitis B virus and die almost immediately after first being infected (within 1 or 2 months after infection).

What happens when babies and children are infected with hepatitis B?

Babies and children are at the highest risk for developing chronic hepatitis B infections once they are exposed to the virus. Although most chronically infected children do not suffer from any symptoms, the virus can stay in their blood and liver for possibly a lifetime, which increases their risk for liver cancer later in life.

- **Babies** - 90% of all babies born to infected women will become chronic carriers. They only have a 5-10% chance of getting rid of the virus (whereas adults have a 90% chance of recovering and a 10% chance of becoming chronically infected).
- **Children** - 60% of young children who are exposed to HBV through contact with other infected children or adults will become chronic carriers. They have a 40% chance of getting rid of the virus.

How will I know if I have "recovered" from a hepatitis B infection?

Ask your doctor for the simple hepatitis B blood tests to find out whether you have recovered from hepatitis B. The blood tests will show that your immune system has gotten rid of the virus and produced “hepatitis B surface antibodies” (HbsAb+ or anti-HBs+). These “surface antibodies” will protect you for a lifetime from any future contact with the hepatitis B virus. It can take up to six months to get rid of the virus entirely, so be patient and careful since you may still be able to spread the virus to others. However, once your blood tests confirm that you have recovered, you cannot infect other people because you no longer have the hepatitis B virus in your bloodstream.

Do I still need the hepatitis B vaccine after I recover from an infection?

You do not need the vaccine once your blood tests show that you have recovered. The hepatitis B surface antibody will protect you against any future hepatitis B infection. You have been “naturally vaccinated”. For example, if you have chicken pox and then recover, your body will make antibodies to protect you against a chicken pox infection in the future.

What does it mean if my doctor tells me that I'm a "chronic carrier"?

A person is diagnosed as a “chronic carrier” when blood tests show that they are unable to get rid of the hepatitis B virus after six months. They are still able to pass the virus on to others because it stays in their blood and liver for possibly a lifetime. Although many chronic carriers should expect to lead long healthy lives, they must be sure to see their family doctor or 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 new drug treatments that can benefit those who show signs of active liver disease.

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 and vaccination?

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. If you speak English, please contact the Hepatitis B Foundation at 215-489-4900 or email us at info@hepb.org