

Audit of the management of pregnant women with chronic hepatitis B and their babies by the Southeast Public Health Unit (SEPHU), Victoria.

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Background

In Victoria, the management of pregnant women with chronic hepatitis B (CHB) and their babies varies considerably between hospitals with no centralised system for data collection. This audit aimed to examine the management of this cohort based on a SEPHU-developed protocol.

Methods

All pregnant women with CHB notified between August 2022 and August 2024 residing in the SEPHU catchment were extracted from the Public Health Event Surveillance System database. Pregnancy outcomes at 31 October 2024, including demographic characteristics, service locations, timing and completion rates of infant hepatitis B immunoglobulin prophylaxis (HBIG) and serology were obtained from healthcare providers. Vaccination status was obtained from the Australian Immunisation Register. Data were summarised descriptively using Microsoft Excel.

Results

There were 97 pregnant CHB cases with the majority non-Indigenous (n=90, 93%) and born overseas (n=78, 80%). Sixty-four women (66%) had delivered at time of data collection; 46 (72%) in public and 18 (28%) in private hospitals.

Sixty-one babies were followed up by SEPHU post-partum. All but one received their birth dose of HBIG. Fifty-eight babies had information on vaccination status and serology testing, of which 42 (72%) were fully vaccinated for age. For babies aged nine months and older (n=25), ten (40%) had serology conducted.

Nineteen babies were followed up for the timing of their birth dose of HBIG and vaccination. The majority (n=16, 84%) received HBIG within the recommended timeframe of 12 hours and all babies received vaccination within the recommended timeframe of 24 hours.

Conclusion

Our data demonstrated good uptake of birth dose of both HBIG and vaccine among babies born to mothers with CHB living in the SEPHU catchment. However, uptake of serology testing for babies could be improved. Data were collated from various databases and sources, highlighting the need for more streamlined approaches to monitor these important indicators.

Disclosure of Interest Statement

Authors have no conflict of interest to declare.