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Does HBsAg positivity change in pregnancy?

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INTRODUCTION: Many international organizations such as WHO, CDC, ACIP recommend HBsAg testing to all pregnant women, and hepatitis B vaccine and hepatitis B hyperimmunoglobulin (HBIG) application to the babies of pregnant women with HBsAg positivity. However, as in most countries, compliance with this proposal is low in our country too. Also, a decrease in HBsAg positivity has been observed in our country in recent years. The aim of this study was to evaluate the status of HBsAg and the results of the examinations of pregnant women who have been followed or given birth in a Maternity Hospital in Izmir province for the last 9 years.

METHODS: Following the approval of the ethics committee, women who were followed up with the diagnosis of pregnancy since 2009 in Izmir Buca Maternity and Children's Hospital included the study group. The data were obtained from the automation system as Excel data; only one result of each pregnant woman was taken into consideration. The number of pregnant women with HBsAg, the number of pregnant women with HBsAg positivity and their age were examined. In addition, in the last 9 years at the hospital pharmacy, the list of infants with HBIG was taken and compared with mothers with HBsAg positivity during pregnancy.

FINDINGS: The number of pregnant women with HBsAg during pregnancy was 23,895, and 366 (1.5%) had HBsAg positivity. When the data were evaluated, it was determined that HBsAg positivity was lower in young age and increased with age. It was observed that HBsAg positivity, which is 1% under 23 years of age, increased with age, and this increase was more evident since the age of 35 years. The names of pregnant women with HBsAg positivity and the names of babies with HBIG were compared. Only 124 (34%) of the 366 HBsAg positive mothers were diagnosed with HBIG at birth. It was understood that the mother of the 242 babies who had had HBIG at birth had no record of HBsAg in this hospital.

CONCLUSION: In our country, HBsAg positivity is significantly lower in pregnant women aged 20 and under due to the national neonatal hepatitis B vaccination program, which has been in practice since 1998. However, it was observed that all pregnant women with HBsAg positivity did not give birth in the same hospital during pregnancy in our study. When the reasons of this situation are examined; pregnant women who were given births in other hospitals; It was determined that there were pregnant women who were followed up in another hospital and who came to this hospital at the time of delivery and made their births in this hospital. This result is noteworthy in terms of showing how important HBsAg should be immediately for pregnant women who applied for childbirth, even if they were not previously seen in that hospital. In addition, it would be beneficial to have a system that allows monitoring of pregnant women in all health institutions through a common software.

Keywords: HBsAg, pregnancy, baby, HBV vaccination, HBIG

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Table 1. HBsAg positivity in pregnant women by age groups

| Ages | Birth years | HBsAg positive | HBsAg negative | Total |
|--------------|-------------|----------------|----------------|-----------|
| <17 | <1999 | 3 (%0,5) | 594 | 597 |
| 18-20 | 2000-1998 | 37 (%1,2) | 2883 | 2920 |
| 21-23 | 1997-1995 | 48 (%1) | 4690 | 4738 |
| 24-27 | 1994-1991 | 95 (%1,5) | 6226 | 6226 6321 |
| 28-33 | 1990-1985 | 100 (%1,6) | 5933 | 6033 |
| 34-44 | 1984-1974 | 82 (%2,5) | 3181 | 3263 |
| 45-55 | 1973-1963 | 1 (%4,3) | 22 | 23 |
| Total | | 366 (%1,5) | 23 529 (%98,5) | 23 895 |