Overview

• Disease Prevention
• Ten Objectives of the Perinatal Hepatitis B Prevention Program (PHBPP)
• Program Goals of PHBPP
• Six Responsibilities of the PHBPP
• NIS Coverage Estimates
• Special Project - Centralized Database
Perinatal hepatitis B is preventable by:

• Screening pregnant women at the first prenatal visit and at delivery

• Giving the birth dose of hepatitis B vaccine and hepatitis B immune globulin (HBIG) to babies born to HBsAg-positive women within 12 hours of delivery

• Giving the birth dose of hepatitis B vaccine to all babies before hospital discharge as a safety net
Ten Objectives

1. Ensure that all pregnant women are tested for hepatitis B surface antigen (HBsAg).
2. Ensure reporting and tracking of HBsAg-positive pregnant women.
3. Ensure that delivery facilities/hospitals receive all prenatal HBsAg lab reports prior to delivery.
4. Ensure identification and management of infants born to HBsAg-positive mothers.
5. Ensure reporting of infants born to HBsAg-positive mothers.
6. Ensure identification and case management of infants born to mothers of unknown HBsAg status.
7. Ensure timely completion of the hepatitis B vaccine series for all infants born to HBsAg-positive mothers.
8. Ensure timely completion of postvaccination serologic testing (PVST) for all infants born to HBsAg-positive women.
9. Ensure vaccination of household contacts 24 months of age and younger.
10. Ensure program quality, monitoring, and evaluation.
The purpose of the Texas Department of State Health Services' Perinatal Hepatitis B Prevention Program (PHBPP) is to:

- Identify hepatitis B surface antigen (HBsAg) positive pregnant women;
- Ensure that infants of HBsAg-positive pregnant women receive hepatitis B immune globulin (HBIG) and hepatitis B vaccine at birth;
- Ensure that infants complete the hepatitis B vaccine series and serological testing;
- Identify household and sexual contacts to HBsAg positive mothers;
- Vaccinate at risk contacts and conduct serological testing.
Six Responsibilities of the Perinatal Hepatitis B Prevention Program

Identify ALL HBsAg positive pregnant women and their infants

Assure administration of postexposure prophylaxis within 12 hours of birth to exposed infants

Universal Hep B vaccine birth dose administration

Identify and vaccinate susceptible household contacts ≤24 months of age; adult household and sexual contacts are referred out.

Assure completion of hepatitis B vaccine series and Postvaccination Serologic Testing (PVST) of exposed infants

Conduct active surveillance, quality assurance, outreach, and education to improve the PHBPP program

Assure administration of postexposure prophylaxis within 12 hours of birth to exposed infants
# NIS Coverage Estimates

**NIS-Child Immunization Coverage Estimates in Texas and U.S., measured at age 24 months except where noted**

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>≥4 doses of DTaP</td>
<td>80.3%</td>
<td>78.6%</td>
<td>79.1%</td>
</tr>
<tr>
<td>≥3 doses of Polio</td>
<td>92.7%</td>
<td>90.5%</td>
<td>91.2%</td>
</tr>
<tr>
<td>≥1 dose of MMR</td>
<td>90.4%</td>
<td>89.3%</td>
<td>90.3%</td>
</tr>
<tr>
<td>Hib&lt;sup&gt;a&lt;/sup&gt;</td>
<td>79.6%</td>
<td>77.7%</td>
<td>78.8%</td>
</tr>
<tr>
<td>HepB birth dose&lt;sup&gt;b&lt;/sup&gt;</td>
<td>75.0%</td>
<td>76.6%</td>
<td>79.4%</td>
</tr>
<tr>
<td>≥3 doses HepB</td>
<td>91.0%</td>
<td>88.3%</td>
<td>89.2%</td>
</tr>
<tr>
<td>≥1 dose of Var</td>
<td>90.0%</td>
<td>89.4%</td>
<td>90.0%</td>
</tr>
<tr>
<td>≥4 doses of PCV</td>
<td>81.0%</td>
<td>80.8%</td>
<td>81.5%</td>
</tr>
<tr>
<td>≥1 dose of HepA</td>
<td>84.7%</td>
<td>87.4%</td>
<td>89.7%</td>
</tr>
<tr>
<td>Rotavirus by 8 months&lt;sup&gt;c&lt;/sup&gt;</td>
<td>73.6%</td>
<td>71.7%</td>
<td>74.1%</td>
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<tr>
<td>≥2 doses of Flu&lt;sup&gt;d&lt;/sup&gt;</td>
<td>56.6%</td>
<td>44.9%</td>
<td>54.8%</td>
</tr>
<tr>
<td>4:3:1:3*:3:1:4 series&lt;sup&gt;e&lt;/sup&gt;</td>
<td>68.5%</td>
<td>66.4%</td>
<td>67.3%</td>
</tr>
</tbody>
</table>

<sup>a</sup> 3 or 4 doses of Hib vaccine, depending on vaccine type.

<sup>b</sup> One dose HepB administered from birth through age 3 days.

<sup>c</sup> 2 or 3 doses, depending on vaccine type, by age 8 months.

<sup>d</sup> Doses must be at least 24 days apart (four weeks, with a four-day grace period).

<sup>e</sup> Includes 4+DTaP, 3+polio, 1+MMR, 3+ or 4+Hib, 3+HepB, 1+Var and 4+ PCV.
Project

• **Centralized Database:** We are in the process of developing a centralized database to streamline workload of the perinatal hepatitis b prevention program.
  • Our goal is the increase reporting, reduce delays in reporting, and reduced the need of double entry.
  • We do not have a completion date at the presently.