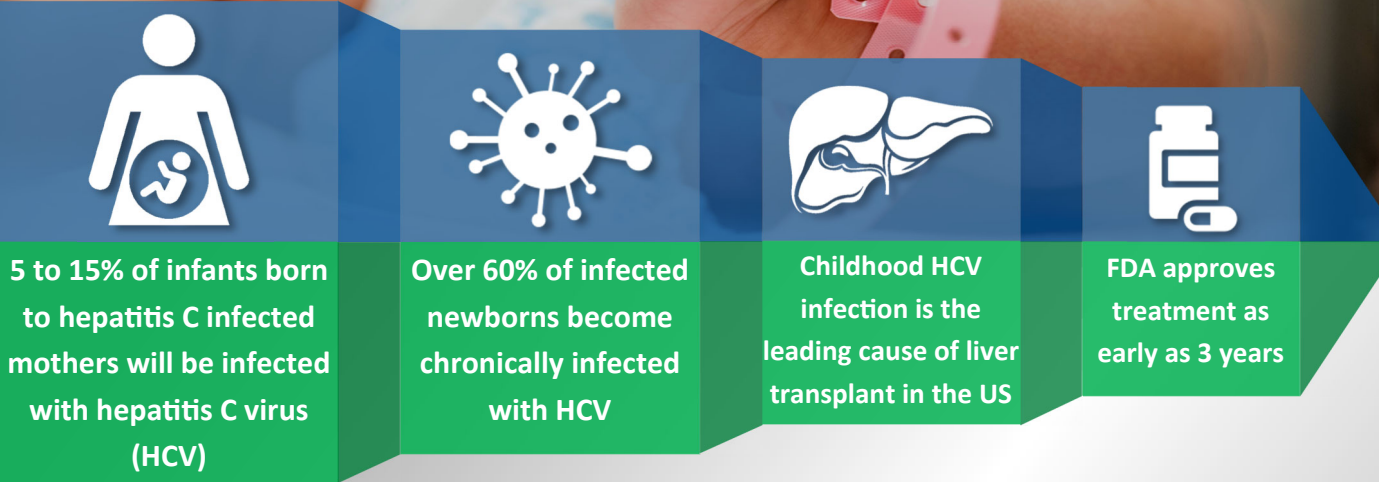


NEWBORN CLINICIANS: ARE YOU PROPERLY ASSESSING AND TESTING FOR HEPATITIS C INFECTION?



Best Practice Recommendations for HCV Testing in Infants

Infant's Age	Testing	Follow-Up
0-2 Months	No Testing	
2-6 Months	HCV RNA Testing	<ul style="list-style-type: none"> • Provide and discuss results • Counsel caregiver on HCV transmission • Refer infant to a specialist (i.e. Infectious disease specialist, hepatologist, or gastroenterologist) for HCV follow-up and liver monitoring
if previously not been tested 7-17 Months	HCV RNA Testing	
if previously not been tested 18+ Months	Anti-HCV with reflex to HCV RNA Test	

MDHHS is encouraging clinicians to test infants/children born to persons with current (has detectable HCV RNA) or probable (anti-HCV reactive, HCV RNA results are not available) HCV infection. Maternal HCV antibodies transfer efficiently from the mother to the child and may not clear for up to 18 months. Therefore, the Centers for Disease Control and Prevention (CDC) and American Association for the Study of Liver Diseases (AASLD) recommends testing infants/children according to this algorithm.



For more information regarding perinatal hepatitis C infection:
https://www.mi.gov/documents/mdhhs/Perinatal_HCV_Tool_Kit_FINAL_609604_7.pdf
<https://www.hcvguidelines.org/unique-populations/children>
<https://www.hcvguidelines.org/unique-populations/pregnancy>

Hepatitis C Testing for Pregnant Persons



As of 2018,
The American Association
For the Study of Liver Diseases (AASLD)
Recommends that **ALL** pregnant persons get tested for
Hepatitis C infection (particularly at initiation of prenatal care)

Disclaimer: The Michigan Disease Surveillance System (MDSS) is limited by binary sex data fields and where possible and when not referring explicitly to data pulled from this database, MDHHS has attempted to use inclusive language around gender that still names key risk factors related to HCV transmission.

In 2010:

Women ages 15-44 in Michigan made up 13% of new Hepatitis C virus (HCV) infections

In 2021:

Women ages 15-44 in Michigan made up 21% of new Hepatitis C virus (HCV) infections

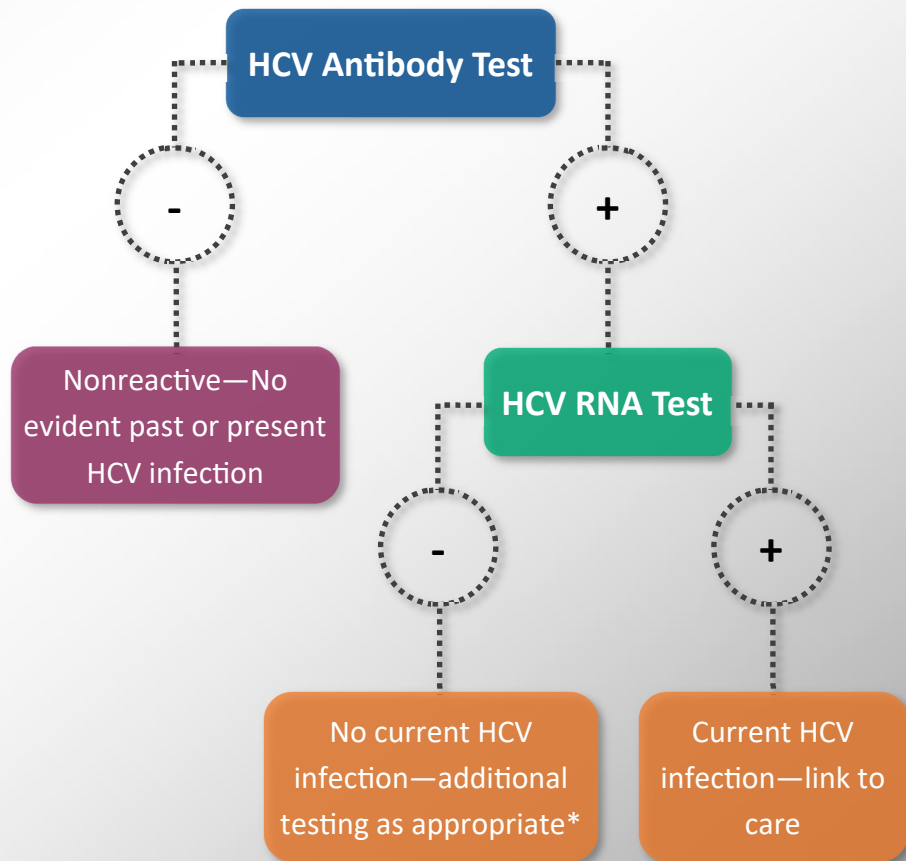
Increase in proportion from 2010-2021 = 61.5%

Currently, pregnant persons are advised to defer HCV treatment until after birth and after completion of breastfeeding.

HCV testing should be conducted in accordance with the CDC’s HCV testing algorithm:

algorithm:

Recommended Testing Sequence for Identifying Current HCV Infection



https://www.cdc.gov/hepatitis/hcv/pdfs/hcv_flow.pdf

*To differentiate past, resolved HCV infection from biologic false positivity for HCV antibody, testing with another HCV antibody assay can be considered

For more information regarding perinatal hepatitis C infection:

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<https://www.cdc.gov/hepatitis/resources/patientedmaterials.htm>

