

U.S. Preventive Services Task Force Seeks Comment on its Draft Recommendation Statement on Hepatitis B Screening for High-Risk Adults

WASHINGTON, D.C. – February 11, 2014 – The U.S. Preventive Services Task Force (Task Force) today posted its draft recommendation statement and draft evidence report on screening for hepatitis B virus infection, recommending screening people who are at high risk for hepatitis B infection. The Task Force is providing an opportunity for public comment on this draft recommendation statement and evidence report until March 11. All public comments will be considered as the Task Force develops its final recommendation and statement.

Today, most people born in the United States have been vaccinated for hepatitis B, which is the best way to prevent the infection. However, there still are almost 1 million people in the U.S. chronically infected with hepatitis B virus (HBV) infection. Among individuals with chronic HBV infection, 15 to 25 percent die from liver disease (cirrhosis) or liver cancer.

After reviewing the evidence, the Task Force's is recommending screening people who have the following risk factors for hepatitis B:

- People who were born in countries and regions with a high prevalence of HBV infection, such as Africa, Southeast Asia, Middle East, Eastern Europe, and the northern countries in South America.
- U. S.-born persons not vaccinated as infants whose parents were born in regions with a high prevalence of HBV infection.
- People who are HIV-positive, injection drug users and men who have sex with men.
- Patients who are have a weakened immune system or undergo treatment for kidney failure (hemodialysis).

The most important way to prevent hepatitis B is to get vaccinated. "The United States has universal vaccination of all infants at birth, catch-up vaccination of adolescents, and vaccination of high-risk groups. Fortunately, most people in the U.S. are no longer at risk of getting hepatitis B," says Task Force member Mark Ebell, M.D., M.S. "Because some countries have high rates of HBV infection, it is important for immigrants from those countries and their doctors to be aware of their risk status and screen them if appropriate."

"The good news is that evidence shows we can catch the disease early in many people who are already infected by screening for hepatitis B virus infection in persons at high risk for infection," says Douglas K. Owens, M.D., M.S. "And, treatment can help prevent liver cancer in people who have chronic hepatitis B infection."

The Task Force's draft recommendation statement and evidence report have been posted for public comment on the Task Force Web site at: www.uspreventiveservicestaskforce.org. Comments can be submitted February 11 to March 10, 2014 at www.uspreventiveservicestaskforce.org/Page/Name/us-preventive-services-task-force-opportunities-for-public-comment.

The Task Force is an independent group of national experts in prevention and evidence-based medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

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