# Screening for Hepatitis B Virus Infection in Nonpregnant Adolescents and Adults
## Clinical Summary of U.S. Preventive Services Task Force Recommendation

<table>
<thead>
<tr>
<th>Population</th>
<th>Asymptomatic, nonpregnant adolescents and adults at high risk for hepatitis B virus (HBV) infection (including those at high risk who were vaccinated before being screened for HBV infection).</th>
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</thead>
</table>
| Recommendation | Screen persons at high risk for HBV infection.  
*Grade: B* |

### Risk Assessment

Important risk groups for HBV infection with a prevalence of ≥2% that should be screened include:

- Persons born in countries and regions with a high prevalence of HBV infection (≥2%)
- U.S.-born persons not vaccinated as infants whose parents were born in regions with a very high prevalence of HBV infection (≥8%), such as sub-Saharan Africa and southeast and central Asia
- HIV-positive persons
- Injection drug users
- Men who have sex with men
- Household contacts or sexual partners of persons with HBV infection

For more information on countries and regions with a high prevalence of HBV infection, visit:  
www.cdc.gov/mmwr/preview/mmwrhtml/rr5708a1.htm.

### Screening Tests

A U.S. Food and Drug Administration–approved hepatitis B surface antigen (HBsAg) test followed by a licensed, neutralizing confirmatory test for initially reactive results should be used to screen for HBV infection. Testing for antibodies to HBsAg (anti-HBs) and hepatitis B core antigen (anti-HBc) is also done as part of a screening panel to help distinguish between infection and immunity.

Diagnosis of chronic HBV infection is characterized by persistence of HBsAg for at least 6 mo.

### Treatment

HBV treatment consists of antiviral regimens. Approved first-line treatments are pegylated interferon α2a, entecavir, and tenofovir. Duration of treatment varies depending on time required to achieve HBV DNA suppression and normalize alanine aminotransferase levels; the presence of HBeAg, coinfection, and cirrhosis; and the choice of drug.

### Balance of Benefits and Harms

There is moderate certainty that screening for HBV infection in persons at high risk for infection has moderate net benefit.

### Other Relevant USPSTF Recommendations

The USPSTF has made recommendations on screening for HBV infection in pregnant women and screening for hepatitis C virus infection in adults. These recommendations are available at www.uspreventiveservicestaskforce.org.

For a summary of the evidence systematically reviewed in making this recommendation, the full recommendation statement, and supporting documents, please go to www.uspreventiveservicestaskforce.org.