



**SCREENING FOR HEPATITIS B VIRUS INFECTION IN NONPREGNANT ADOLESCENTS AND ADULTS
CLINICAL SUMMARY OF U.S. PREVENTIVE SERVICES TASK FORCE RECOMMENDATION**

Population	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).
Recommendation	Screen persons at high risk for HBV infection. Grade: B

Risk Assessment	<p>Important risk groups for HBV infection with a prevalence of $\geq 2\%$ that should be screened include:</p> <ul style="list-style-type: none"> • Persons born in countries and regions with a high prevalence of HBV infection ($\geq 2\%$) • U.S.-born persons not vaccinated as infants whose parents were born in regions with a very high prevalence of HBV infection ($\geq 8\%$), 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 <p>For more information on countries and regions with a high prevalence of HBV infection, visit: www.cdc.gov/mmwr/preview/mmwrhtml/rr5708a1.htm.</p>
Screening Tests	<p>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.</p> <p align="center">Diagnosis of chronic HBV infection is characterized by persistence of HBsAg for at least 6 mo.</p>
Treatment	<p>HBV treatment consists of antiviral regimens. Approved first-line treatments are pegylated interferon $\alpha 2a$, 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.</p>
Balance of Benefits and Harms	<p>There is moderate certainty that screening for HBV infection in persons at high risk for infection has moderate net benefit.</p>
Other Relevant USPSTF Recommendations	<p>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.</p>

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.