Hepatitis B Control

Why in news?

Bangladesh, Bhutan, Nepal and Thailand became the first four countries in the WHO's South-east Asia region to have successfully controlled hepatitis B.

What is hepatitis B?

- Hepatitis B is a viral infection that attacks the liver and can cause both acute and chronic disease.
- The virus is most commonly transmitted from mother to child during birth and delivery, as well as through contact with blood or other body fluids.
- WHO estimates that in 2015, 257 million people were living with chronic hepatitis B infection (defined as hepatitis B surface antigen positive).
- Hepatitis B can be prevented by vaccines that are safe, available and effective.
- The virus is said to be controlled when the disease prevalence is reduced to less than 1% among children less than 5 years of age.

What is the case with India?

- India introduced hepatitis B vaccine in the Universal Immunisation Programme in 2002 and scaled-up nationwide in 2011.
- **Vaccination coverage** - A study published in 2013 found lower coverage of hepatitis B vaccine in 8 of the 10 districts surveyed.
- But, the coverage has increased with the introduction of a pentavalent vaccine on a pilot basis in Kerala and TN in 2011 and national roll-out in 2014-2015.
- According to the WHO, the coverage of hepatitis B third dose had reached 86% in 2015.
- **Prevalence** - Despite the above, about 1 million people in India become chronically infected with the virus every year.
- According to the Health Ministry, as on February 2019, an estimated 40 million people in India were infected.
- Hepatitis B infection at a young age turns chronic, causing over 1,00,000

premature deaths annually from liver cirrhosis or liver cancer.

- Despite the high vaccination coverage, disease prevalence in children aged less than 5 years has not dropped below 1%.
- One of the reasons for this is the sub-optimal coverage of birth dose in all infants within 24 hours of birth.

How significant is the birth dose?

- Hepatitis B birth dose, given in the first 24 hours, helps prevent vertical transmission from the mother to child.
- The compulsion to increase birth dose to cut vertical transmission arises from two important reasons:
    1. about 70-90% newborns infected this way become chronic carriers of hepatitis B
    2. about 20-30% carriers in India are due to vertical transmission
- But even 7 years after the Health Ministry approved the birth dose in 2008, its coverage remained low - 45% in 2015 and 60% in 2016.
- More worryingly, even in the case of institutional delivery, the birth dose vaccine coverage is low - 76.36% in 2017.
- Incidentally, institutional delivery accounts for about 80% of all deliveries in the country.
- The birth dose coverage when delivery takes place outside health-care institutions is not known.

What is the reason for low coverage?

- One of the reasons for the low coverage is the fear of wastage of vaccine when a 10-dose vial is used.
- [*Vial* - a small container, mostly cylindrical and made of glass, used especially for holding liquid medicines]
- Unfortunately, health-care workers are very often unaware of the WHO recommendation that allows hepatitis B open-vial policy.
- Opened vials of hepatitis B vaccine can be kept for a maximum duration of 28 days for use in other children if the vaccine meets certain conditions.

What should be done?

- Controlling the hepatitis B virus calls for universal vaccination of newborns.
- There is also a need to increase public awareness about the merits of the birth dose.

Source: The Hindu

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