



Date

Confidential

Physician Address

Dear:

RE: *patient name*

DOB:

PHN:

We have recently received an isolated hepatitis B core antibody result (anti-HBc positive, HBsAg negative and anti-HBs negative) for this patient. These findings may have 4 possible interpretations:

1. False positive Anti-HBc

This is the most likely scenario in BC, where HBV prevalence is low. Client is susceptible to HBV infection.

Recommendation: Offer one complete hepatitis B vaccine series. No routine follow-up is required. If there is an ongoing risk of infection, test for anti-HBs 4 weeks after series completion.

2. Remote resolved infection with persistence of anti-HBc and undetectable anti-HBs level (latent HBV infection)

More commonly seen in clients from HBV endemic countries and immunosuppressed clients with HIV infection. This scenario is not easily distinguished from a false positive anti-HBc result.

Recommendation: Offer one complete hepatitis B vaccine series. No routine follow-up is required. If there is ongoing risk of infection, test for anti-HBs 4 weeks after series completion. If immunosuppressed, reactivation of latent HBV infection can occur.

3. Resolved acute HBV infection prior to the appearance anti-HBs

Recommendation: If acute HBV infection is suspected, test for anti-HBc IgM and repeat HBV screening tests (anti-HBc, HBsAg and anti-HBs) in 2 to 4 weeks. Given the high level of hepatitis B immunization in BC, acute HBV infections are rare.

4. Chronic infection with undetectable HBsAg level

Patient may have a low level of viremia and could be infectious. This scenario is very rare.

Recommendation: If there is evidence of HIV infection, HIV/hepatitis C co-infection, immunosuppression or liver disease, recommend HBV DNA and ALT testing for further evaluation. If immunosuppressed, reactivation of latent HBV infection with detectable HBsAg can occur.

If a chronic HBV infection is present, offer Hepatitis A vaccine, Pneumococcal vaccine and an annual Influenza vaccine. Offer household and sexual contacts hepatitis B vaccine.

HIV and hepatitis C testing is also recommended, as isolated core results are seen more frequently in the presence of HIV infection or HIV/HCV co-infection. Please see the BCCDC Hepatitis B Guidelines for further information (<http://goo.gl/Jq8Dkk>).

The vaccines are available by {enter method the jurisdiction prefers vaccines be administered}.

Sincerely,

{First Name Last Name}

{Position}

