## Appendix 5: Template letter to notifying clinicians for cases of unspecified hepatitis B

Private and Confidential

Enter Date HERE

Enter Name HERE

Enter Address HERE

ENTER SUBURB STATE PCODE HERE

Dear Dr Jones,

According to laboratory results notified to the Department of Health, you recently diagnosed John SMITH, DOB 01/01/1901 with hepatitis B infection. I am writing to advise you of the following.

|  |
| --- |
| Liver cancer is the fastest increasing cause of cancer death in Australia.  Free vaccine is available for susceptible household and sexual contacts to prevent Hepatitis B infection and thereby eliminate the risk of cirrhosis and liver cancer from Hepatitis B. |

***Identification and vaccination of susceptible household contacts and intimate sexual partners***

Determining who else may have been exposed to the virus is an important part of controlling the spread of hepatitis B. This includes the possible source of the infection, and also people who may be exposed to an infectious case.

The [add jurisdiction] Health Department provides free hepatitis B vaccine to a number of priority populations including all household and sexual contacts of a person with Hepatitis B infection. Others include those who are HIV or Hepatitis C positive or people who inject drugs.

Details of exposure assessment and prophylaxis with vaccine and (sometimes) Hepatitis B immunoglobulin (HBIg) can be found in The Australian Immunisation Handbook, available online at [Department of Health website](http://www.immunise.health.gov.au/)

Where possible all household contacts and sexual partners of John Smith should be advised of their increased risk and tested for HBsAg, anti-HBs and anti-HBc. Those found to be susceptible to Hepatitis B (i.e. all HBsAg, anti-HBs and anti-HBc being negative), should be vaccinated and protection confirmed on serological testing 4 - 8 weeks after last dose.

Contact tracing should be discussed with Mr Smith and an agreed position reached as to how it will be undertaken and how confidentiality will be managed. Mr Smith may prefer to advise contacts personally and encourage testing and follow up. Alternatively it may be agreed that you or your practice nurse will advise identified contacts of the need for testing (with or without explicit disclosure of their identity)

The free vaccine can be obtained by completing attached request form.

If you have further queries, please contact the [jurisdictional PHU] on [jurisdictional phone number].

### Management of chronic Hepatitis B infection (CHB)

The [relevant jurisdictional guidelines]state that a medical practitioner who diagnoses a person as having hepatitis B must provide or arrange for that person to receive counselling and information about the infection.

There is no longer a concept of the “healthy carrier” and treatment options for hepatitis B have expanded rapidly in recent years. All patients with CHB should have yearly viral load monitoring and where required be regularly screened for liver cancer. Antiviral treatment for CHB prevents progression of liver disease and reduces the risk of cancer by up to 75%. Approximately 15% of patients with CHB need antiviral treatment.

Management guidelines and resources for GPs including fact sheets in multiple languages are available at:

* [HepBHelp website](http://www.hepbhelp.org.au/)
* ASHM web site www.ashm.org.au under making new diagnosis of hepatitis B

### Who should I test for HBV infection?

The National Hepatitis B Testing Policy has identified the following as high priority populations for testing. (Refer to policy for full details of indications for testing at http://testingportal.ashm.org.au/):

* People born in countries with intermediate or high HBV prevalence. (Refer to testing policy for more details)
* Aboriginal and Torres Strait Peoples
* All patients undergoing chemotherapy or immunosuppression (due to concerns of reactivation)
* Unvaccinated adults at higher risk of infection
* Household contact and sexual partners of people with acute or chronic HBV infection
* People who have ever injected drugs
* Men who have sex with men
* People with multiple sexual partners, sex workers
* People who are or have been in custodial settings
* People with HIV or hepatitis C
* Patients undergoing dialysis.

### Do I need to notify?

Notification of hepatitis B infection with relevant clinical information is vital to efforts to prevent or control the spread of infection. If you haven’t already done so, please notify this case of Hepatitis B by completing enclosed notification.

Thank you for your help in this important matter

Director of Public Health