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## Hepatitis **B**

## **Definition**

Hepatitis B is the world's most common serious liver infection. It is caused by a virus that attacks liver cells and can lead to liver failure, cirrhosis or cancer of the liver. Hepatitis B can be transmitted by exposure to blood and bodily fluids.

## How can Hepatitis B be prevented in the work place?

- 1. Universal Precautions
  - Use universal barrier precautions when in contact with blood and bodily fluids
  - Wash hands before and after all contact with blood and bodily fluids
- 2. Education
  - Understand which procedures and protective equipment to use to prevent or minimize contact with blood and bodily fluids
  - Follow the appropriate protocols if exposed to blood and bodily fluids
  - Initial Hepatitis B education is provided during new recruit training
- 3. If exposed to blood and bodily fluids follow protocols as outlined in section 2 of policy 27.
- 4. Hepatitis B vaccine
  - a) The protocol for adults over 19 years of age includes 3 doses of vaccine administered at 0, 1, and 6 months.
  - b) Upon completion of the protocol, Firefighters should have blood tests performed at their family doctor 1 to 6 months after the 3<sup>rd</sup> dose to confirm the vaccine's effectiveness.
  - c) If blood test confirms antibody levels > 10, no further action is required, and you are considered immune to Hepatitis B. You may provide a copy of your results to Employee Health Services so they can keep a copy in your personal confidential health file at the City.
- d) If you have previously demonstrated protective antibody levels, i.e. have confirmed lab test results with an antibody level ≥ 10, you will <u>not</u> contract the disease when exposed to the **MISSISSAUGA** Leading today for tomorrow

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Hepatitis B virus, whether or not, any future lab test results indicate a decrease in antibody level  $\geq$  10. You DO NOT require a booster dose.

- e) If antibody levels, after the initial 3 doses, are < 10, one vaccine booster should be given and re-testing for antibody response should occur 1 month later. If after retesting antibody levels are > 10, you are considered <u>immune</u>. If after retesting antibody levels are < 10, complete the next 2 doses of vaccine. Once the second series is complete follow-up with another blood test within 1 to 6 months after the 3<sup>rd</sup> dose (2<sup>nd</sup> round). If antibody response is < 10, then you are considered a "<u>non-responder</u>".
- f) Non-responders with suspected exposure to Hepatitis B should be provided with immediate first aid in an emergency room setting, which will include blood work testing for antibody and antigen levels, Hepatitis B Immunoglobulin (HBIG) and possibly Hepatitis B vaccine. This will likely involve consultation with the Emergency physician and Infectious Disease Specialist. If you are a "non-responder" contact your Captain, immediately, to initiate the appropriate response should you come in contact with Hepatitis B.
- g) Anyone <u>uncertain</u> of antibody status, after the initial series, should obtain a blood test to determine antibody status, prior to a booster being given. Employee Health Services is available to administer a Hepatitis B booster but only once they are provided with written confirmation of your antibody status. Please contact Employee Health Services should there be any questions or comments.
- h) For more detailed information on Hepatitis B immunizations, the Seventh Edition of the Canadian Immunization Guide can be reviewed at http: <u>http://www.phac-</u> <u>aspc.gc.ca/publicat/cig-gci/p04-hepb-eng.php</u>.



HUMAN RESOURCES DIVISION





\*If blood test results confirm antibody levels  $\geq$  10, no need for any boosters, even if levels decline/decrease with time as immune memory persists despite antibody level result.



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