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The President

Federation of Obstetrics and Gynaecological Societies of India (FOGSI)

Sub: Support of FOGSI for improving coverage of birth dose of Hepatitis B in Maharashtra

With an estimated prevalence of Hepatitis B surface antigen (HBsAg) of 3-4 %, India has over 40 million hepatitis B carriers. Chronic hepatitis B is the cause of 40-50% of liver cancers. Every year over 100,000 Indians die due to Hepatitis B related complications. HBVrelated acute and chronic liver disease is one of the major causes of infectious disease-related mortality worldwide. HBV is 100 times more infectious than Human Immunodeficiency Virus (HIV). Chronic HBV infection is one of the most common and persistent viral infections in humans. If infection occurs in infancy, 99% remain asymptomatic. 90% of these become chronic carriers. In contrast, 30% of those infected during childhood (1-5 yrs) and 6% of those infected during adulthood become chronic carriers. Persons with chronic HBV infection have a 15-25% risk of dying prematurely due to HBV related liver cirrhosis and cancer. Chronicity is common following acute infection in neonates. 90% of neonates born to Hepatitis B e antigen (HB eAg) positive mothers will develop chronic infection.

The hepatitis B vaccine is the first safe and effective vaccine against a cancer (primary liver cancer). The birth dose of Hepatitis B vaccine is the first step in creating a vaccine safety net that will protect infants from Hepatitis B infection and the development of chronic hepatitis-B infection if acquired through contact with an infected mother, household member or a caregiver.

Hepatitis B immunization under routine immunization program

The birth dose is administrated using a monovalent vaccine in a 10 dose vial with an open vial policy (within 24 hours of birth).

Maharashtra is the first state to issue GR on birth dose vaccination which includes Hepatitis B vaccination within 24 hrs of delivery.

Analysis of HMIS report of year 2020-21 done separately for government and private institutes shows that, 42% of State's total deliveries occur in government institutes where the coverage of hepatitis B birth dose is 92% and rest 58% deliveries occur in private institutes where the coverage of Hepatitis B birth dose is only 47%. It is seen that the coverage of Hepatitis B birth dose is more than 90% in government institutes, while it is very less for private institutes, which is affecting states overall performance of hepatitis B birth dose coverage.

We request for following action-

- 1. FOGSI president to communicate through their channel to all their members for birth dose vaccination of Hepatitis B. Since perinatal or early postnatal transmission is the most important source of chronic HBV infection globally, all infants (including low birth weight and premature infants) should receive their first dose of hepatitis B vaccine as soon as possible after birth, ideally within 24 hours.
- 2. All private hospitals where deliveries occur should implement the policy of "universal Hepatitis-B birth dose in the labour rooms itself immediately after birth within 24 hours" to ensure that every new-born receives the first dose of Hepatitis-B vaccination.

Your support in implementation of hepatitis B birth dose vaccination will help to improve greatly the coverage of Hepatitis B birth dose coverage in Maharashtra.

Addl. Director of Health Services, State Family Welfare Bureau, Pune.