

# Health Service Circular



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*sets out a specific action on the part of the recipient with a deadline where appropriate*

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## Hepatitis B Infected Health Care Workers

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**For action by:**

- Health Authorities (England) - Chief Executives
- NHS Trusts - Chief Executives
- Primary Care Trusts - Chief Executives
- Special Health Authorities - Chief Executives
- Medical Directors of NHS Trusts - for distribution to:
  - Occupational Health Physicians
  - Consultant Microbiologists and Virologists
  - Clinical Directors of Community Dental Services
- Nurse Executive Directors of NHS Trusts - for distribution to:
  - Heads of Midwifery Services/Senior Midwives of NHS Trusts
  - Occupational Health Nurses
- GP Practices
- General Dental Practices

**For information to:**

- Directors of Public Health
- Directors of Personnel of NHS Trusts
- Regional Directors of Public Health
- Consultants in Communicable Disease Control
- Chairs of Infection Control Committees of NHS Trusts
- Regional Nurse Directors
- Nurse Advisers in Health Authorities
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- Dental Postgraduate Deans
- Deans of Medical/Dental Schools
- Schools and Colleges of Nursing and Midwifery
- Regional Directors of Education and Training
- Chairs of Education Consortia
- Public Health Laboratory Service

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It is also available on the Department of Health web site at  
<http://www.doh.gov.uk/coinh.htm>

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# Hepatitis B Infected Health Care Workers

## Summary

1. This circular supplements previous guidance on hepatitis B infected health care workers, and aims to reduce further the risk of transmission of infection to patients. The circular recommends carrying out additional testing of hepatitis B infected care workers who are e-antigen (HBeAg) negative and perform exposure prone procedures, and restricting the working practices of those with higher viral loads.

2. Previous guidance on hepatitis B infected health care workers who are e-antigen positive still applies (Health Service Guidelines HSG (93)40: *Protecting health care workers and patients from hepatitis B* - 18 August 1993, and its Addendum issued under cover of EL(96)77 - 26 September 1996).

## Action

3. NHS Trusts, Primary Care Trusts, independent contractors in the General Medical and Dental Services and Health Authorities (who employ relevant staff) should ensure that there are arrangements in place:

- to have all hepatitis B infected health care workers, who are e-antigen negative and who perform exposure prone procedures or clinical duties in renal units, tested for viral load (hepatitis B virus DNA). The testing of staff currently employed should be completed by 1 June 2001 at the latest;
- to restrict those who have a viral load which exceeds  $10^3$  (i.e. 1000) genome equivalents per ml from performing exposure prone procedures. Subject to annual re-testing, health care workers whose viral load does not exceed  $10^3$  genome equivalents per ml need not have their working practices restricted, but they should receive appropriate occupational health advice;
- to manage blood exposure incidents for both health care workers and patients. Health Authorities, NHS Trusts or Primary Care Trusts should designate medical staff to assess incidents and to consider the need for hepatitis B immunoprophylaxis, where indicated. Independent contractors should ensure that they have similar arrangements in place for staff and patients.

## Background & Other Information

### Previous guidance

4. Previous guidance mentioned in paragraph 2 about the immunisation and testing of health care workers who undertake exposure prone procedures<sup>†</sup>, and the restriction of working practices of health care workers who are e-antigen positive **still applies**. Therefore, testing for e-markers should still be carried out.

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<sup>†</sup> Exposure prone procedures are those where there is a risk that injury to the health care worker could result in exposure of the patient's open tissues to the blood of the health care worker.

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Transmissions to patients from hepatitis B infected health care workers without the e-antigen

5. Since the 1993 guidelines were issued, there have been several incidents in which hepatitis B infected health care workers without the e-antigen have been associated with transmission of infection to their patients. It is thus necessary to introduce further tests to assess infectivity.

Use of viral load tests and restriction on practice of hepatitis B infected health care workers without the e-antigen

6. The Advisory Group on Hepatitis has recommended that hepatitis B infected health care workers who are e-antigen negative and who perform exposure prone procedures should have their viral loads measured, and that those with viral loads exceeding  $10^3$  genome equivalents per ml should not perform exposure prone procedures in future. To ensure consistency of results, arrangements have been made for two designated laboratories<sup>†</sup> to undertake this. Employers will have to meet the costs of testing.

7. Hepatitis B infected health care workers who are e-antigen negative and whose viral loads do not exceed  $10^3$  need not be restricted from performing exposure prone procedures or from any other areas of work. However, these health care workers should have their viral loads re-tested regularly at 12 monthly intervals.

Timescale for initial implementation

8. Initial assessments of the viral load should be completed by 1 June 2001 at the latest for all hepatitis B infected health care workers in post who are e-antigen negative and who perform exposure prone procedures. During this initial implementation phase, these health care workers need not be restricted from carrying out exposure prone procedures whilst awaiting viral load test results.

**Associated Documentation**

9. More detailed guidance to assist those responsible for implementing the new arrangements is attached for addressees requested to take action, Directors of Public Health and Consultants in Communicable Disease Control. It is also available on the Department of Health web site at <http://www.doh.gov.uk/nhsexec/hepatitisb.htm>

*This Circular has been issued by:*

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