

The word hepatitis means inflammation of the liver, which may have different causes such as the use of particular drugs, certain illnesses or some viruses. The hepatitis B virus (HBV) is one such cause, as are the hepatitis A (HAV) and hepatitis C (HCV) viruses (see *Infovihtal #18*). Despite their similar names, their effects and treatments are different.

People with HIV may also have HBV or HCV as these viruses share some transmission channels.

HBV does not largely appear to affect the seriousness of HIV infection or the speed at which it progresses. If the liver is damaged, however, some antiretroviral drugs may not work as well. In the meantime, if HIV has weakened your immune system, your hepatitis B may worsen.

Most people do not notice anything when infected by HBV, although others show symptoms, which are sometimes serious, such as jaundice (yellowing of the eyes and skin), loss of appetite, abdominal pain, discomfort, nausea, vomiting, muscular and joint pains or fever.

HBV can be eliminated by the body itself. For some people, however, this is not possible and the infection becomes chronic. Unless it is treated, it may cause serious damage to the liver and health over time.

Transmission and prevention

HBV is not transmitted from one person to another through everyday activities such as kissing, holding hands, hugging or sharing drinking or eating utensils. Like HIV, HBV is transmitted through contact with the blood, semen, vaginal fluids, or saliva, or from mother to child before or during childbirth. It is able to survive outside the organism for several days and may affect other people during this time.

Use of condoms and syringes and clean injection material may, to a large extent, reduce the risk of transmission. Remember that there is also a vaccine to prevent infection with HBV.

This virus can also be transmitted from mother to child and therefore all pregnant women should have a hepatitis B check. If the result is positive, in order to avoid transmission, the mother should have a hepatitis B immune globulin injection and the baby should be given an initial dose of the vaccine in its first 12 hours of life.

Vaccination

It is recommendable for people with HIV to be vaccinated against hepatitis B, although before doing so they should first have a simple blood test to find out whether they have been exposed to this virus.

The vaccination consists of a series of three injections administered over a six-month period. The vaccine is safe and is over 90% effective in people without HIV. Protection may, however, diminish over time and another booster shot is sometimes required.

If you have an HIV-weakened immune system, the vaccination may not be so effective. You may therefore be advised to wait until your immune system has grown stronger (through antiretroviral therapy). Some people with HIV need to repeat the vaccination or to be given higher doses for it to work.

Tests

There are different tests for monitoring the evolution of hepatitis B and for determining the degree of damage in the liver. Normally a blood test is enough although another type of examination, which could involve a type of scan (Fibroscan®) or a small operation to extract a liver sample (biopsy), may sometimes be necessary.

These tests can be used to determine when to begin treatment of this virus and to show how you are responding to therapy.

Treatment

Although hepatitis B cannot be cured with medication, treatment is mainly intended to reduce the viral load of HBV and to keep it suppressed, which in some cases can prevent, delay, halt and reverse liver damage.

Before starting treatment against HIV, your doctor should determine whether you have HBV as this information will condition the choice of therapy. There are drugs (lamivudine, emtricitabine and tenofovir), for example, that act against HIV and HBV at the same time.



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