

Should I have my baby tested for Hep C?

It's your choice as to whether your baby gets tested or not. You should be given information about what your baby is being tested for and why. Some parents choose not to test their child until she/he is older, or has medical problems which might be related to the Hep C virus. Many parents choose not to test as they would rather avoid the potential stigma associated with having a medical condition such as Hep C.

What is involved in getting my baby tested for Hep C?

There are two basic blood tests for Hep C, the antibody test, and the PCR test. Babies born to mothers with Hep C "appear" positive at birth for Hep C antibodies because babies are born with their mother's antibodies from the pregnancy. The baby develops its own immune system after birth and the mother's antibodies will disappear by about 18 months, when an accurate antibody test can be done.

If the antibody test is negative at 18 months your baby does not have Hep C. If the antibody test comes back positive, another test called a PCR test will be done to check for the presence of the Hep C virus itself before a diagnosis is confirmed. The PCR test can be done as early as 4 months of age, but as with the antibody test, the longer you wait the more accurate the results will be.

Who do I tell?

Think carefully before telling people your child is Hep C positive. There is no need to tell child care facilities or schools as they have policies in place for infection control. Your child is not putting anyone at risk by having Hep C.

It's important to remember that most babies don't get the Hep C virus;

you can enjoy a happy, healthy pregnancy

For more information about transmission risks and how to minimise them, disclosure and possible discrimination, or any other questions you might have, contact:

The Hepatitis Council of Queensland on **1800 648 491** or **www.hepqld.asn.au**
Or call the National hepatitis info-line **1300 HEP ABC (1300 437 222)** to be put through to the closest hepatitis council in your state or territory.

Women's Health Queensland Wide Inc. on **3839 9988** or for regional callers **1800 017 676**. or visit:

www.womhealth.org.au

Australian Breastfeeding Association Helpline on **1800 686 2686**

Hep C

My Baby & Me



It's common for women with Hepatitis C (Hep C) to have questions or concerns during pregnancy, birth and breastfeeding about the possible impact of their Hep C status on their baby. This pamphlet answers some Frequently Asked Questions and provides basic information.



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What are the chances my baby will have Hep C?

Women with Hep C have a very low risk of passing Hep C on to their baby before or during birth. About 95% of babies born to Hep C positive mothers DO NOT have the virus.

Hep C is a virus that affects the liver and is passed on by blood to blood contact between people. Transmission usually happens during injecting drug use, non-sterile tattooing or piercing, if someone received non-sterile medical procedures when overseas or before 1989. Low risk transmission situations include sharing personal hygiene items like toothbrushes, razors or nail and hair clippers.

How will my Hep C affect my pregnancy?

If you can keep your liver healthy during the pregnancy then Hep C should have no ill effects on the pregnancy. Keep in mind the things you would normally do to keep you and your baby healthy, such as relaxation, regular moderate exercise, limiting high fat foods, eating healthy foods, and not drinking alcohol or smoking. Talk to your health professional about your individual health needs.

When is it safe to start Hep C treatment?

You can't have treatment for Hep C while you're pregnant or breastfeeding, or while you are trying to get pregnant. Pregnancy must be avoided while either partner is on Hep C treatment (and for 6 months afterwards) because the medications used to treat Hep C have been associated with severe birth defects. If you are thinking about having treatment at a later date, ask your doctor to refer you to a Liver Clinic where staff can give you information and talk to you about your choices.



Can my partner give the baby Hep C?

Your baby cannot get Hep C from your partner during pregnancy.

How will my Hep C affect the birth?

The decision about whether to have a vaginal birth or a caesarean section will be made by you and your midwife and/or doctor based on the same information as a woman who doesn't have Hep C (for example progression of labour and the baby's health). Some procedures may be changed or avoided during the birth, but these will be explained to you and you can talk about it with your midwife or doctor.

Breastfeeding?

You are encouraged to breastfeed your baby. Hep C is passed on via blood contact and not through breast milk. The only possible risk to your baby is if blood is present during breastfeeding. Temporarily stop breastfeeding if you have cracked or bleeding nipples. You will need to express and throw away the milk until your nipples heal. Once they have healed, you can start breastfeeding again. You can discuss breastfeeding with a midwife or lactation consultant.

Do I need to worry about blood after the birth?

It's normal for women to bleed for some time after delivering a baby. You will be advised to take the same care or standard precautions as everyone should around blood. Bathing with your baby is safe so long as you are not bleeding at the time. Your skin is a protective shield and is the best barrier against the Hep C virus for you and your family, including the new baby.



What does "standard precautions" mean?

These are basic rules for hygiene that everyone should follow, whether or not they have Hep C. They are:

- wash your hands with soap whenever you have been in contact with blood
- cover up cuts & broken skin with a waterproof dressing
- clean up your own blood if possible (including disposal of sanitary pads)
- clean up blood spills with soapy water or bleach

How does Hep C affect babies/children?

Research is telling us more all the time about how Hep C affects children. For those few children who do get Hep C, it usually doesn't have a big impact on their childhood health. Normally children don't experience any Hep C symptoms and rarely need treatment. Because very few children have had treatment there is not much information available about how they respond to treatment, but this information is growing with time.