

CDC Calls for Infants to be Tested for Hepatitis C

Josie Cooper

The Alliance for Patient Access (allianceforpatientaccess.org), founded in 2006, is a national network of physicians dedicated to ensuring patient access to approved therapies and appropriate clinical care. AfPA accomplishes this mission by recruiting, training and mobilizing policy-minded physicians to be effective advocates for patient access. AfPA is organized as a non-profit 501(c)(4) corporation and headed by an independent board of directors. Its physician leadership is supported by policy advocacy management and public affairs consultants. In 2012, AfPA established the Institute for Patient Access (IfPA), a related 501(c)(3) non-profit corporation. In keeping with its mission to promote a better understanding of the benefits of the physician-patient relationship in the provision of quality healthcare, IfPA sponsors policy research and educational programming.



“Children and infants should be tested for hepatitis C if they may have been exposed at or around birth, according to new recommendations from the Centers for Disease Control and Prevention.”

Children and infants should be tested for hepatitis C if they may have been exposed at or around birth, according to [new recommendations](#) from the Centers for Disease Control and Prevention.

A nucleic acid test can be given between 2 months and six months of age to ensure timely diagnosis and treatment. The CDC has also recommended screening women for hepatitis C during each pregnancy.

Hepatitis C, Pregnant Women & Newborns

The push for early testing reflects rising rates of hepatitis C in the United States. The incidence has [risen significantly](#) over the past

several years, coinciding with the increased use of intravenous drugs accompanying the opioid epidemic.

Women of childbearing age have been [disproportionately impacted](#). Perinatal transmission from mother to child is the most common way for children to be infected with hepatitis C. Around 8% of babies born to hepatitis C-positive women contract the infection themselves.

“Women of childbearing age have been disproportionately impacted. Perinatal transmission from mother to child is the most common way for children to be infected with hepatitis C. Around 8% of babies born to hepatitis C-positive women contract the infection themselves.”

Because hepatitis C may not be easily identifiable, however, pregnant mothers may not know they are at risk. However, parents are likely to bring their babies to well-child visits in the first six months of life, allowing healthcare providers to test for the virus.

The Benefits of Early Testing

Early testing [is predicted](#) to both save lives and reduce healthcare costs.

Early diagnosis in young children can enhance their quality of life and generate fewer long-term health system costs. Unrecognized or incorrectly diagnosed hepatitis C, on the other hand, can damage children’s health and increase the risks and costs of later treatment.

“Early diagnosis in young children can enhance their quality of life and generate fewer long-term health system costs. Unrecognized or incorrectly diagnosed hepatitis C, on the other hand, can damage children’s health and increase the risks and costs of later treatment.”

Providers can now familiarize themselves with the CDC’s new recommendation for universal screening of pregnant women and early testing of exposed infants. The nucleic acid test can be administered to infants to ensure they have access to early evaluation and medication, now approved for [children as young as three](#).

Testing both pregnant mothers and infants during the first six months of life provides the best chance of identifying and adequately treating the disease in its most vulnerable victims.

“The nucleic acid test can be administered to infants to ensure they have access to early evaluation and medication, now approved for children as young as three. Testing both pregnant mothers and infants during the first six months of life provides the best chance of identifying and adequately treating the disease in its most vulnerable victims.”

Corresponding Author



Josie Cooper
Executive Director
Institute for Patient Access
2020 K Street NW, Suite 505
Washington, DC 20006
Telephone: (202) 951-7095
Email: jcooper@woodberryassociates.com

References:

1. https://www.cdc.gov/mmwr/volumes/72/rr/rr7204a1.htm?ACSTrackingID=USCDCNPIN_162-DM116310&ACSTrackingLabel=CDC%20publishes%20updated%20perinatal%20hepatitis%20C%20testing%20recommendations&deliveryName=USCDCNPIN_162-DM116310
2. <https://www.cdc.gov/hepatitis/statistics/2020surveillance/hepatitis-c/figure-3.4.htm>
3. <https://publications.aap.org/pediatrics/article-abstract/doi/10.1542/peds.2023-064242/194580/Earlier-Testing-of-Infants-With-Perinatal?redirectedFrom=fulltext?autologincheck=redirected>
4. [https://www.jpeds.com/article/S0022-3476\(23\)00236-6/full-text](https://www.jpeds.com/article/S0022-3476(23)00236-6/full-text)
5. <https://healthpolicytoday.org/2023/01/20/will-hepatitis-c-testing-for-high-risk-infants-be-expanded/>

Disclosure: Josie Cooper is executive director of the Alliance for Patient Access. This article was also published at healthpolicytoday.org.

NT