

HEPATITIS

Lamivudine given to expectant mothers reduces HBV transmission

Administration of lamivudine to expectant mothers with hepatitis B late in pregnancy may reduce the likelihood of viral transmission to the newborn baby, a new study reports.

Infants who are born to mothers with hepatitis B are at risk of acquiring the infection perinatally. The multicenter, double-blind study by Wei-Min Xu and colleagues randomly allocated 150 mothers with high viral loads of HBV to receive either lamivudine or placebo from week 32 of gestation to week 4 postpartum. After birth, infants were vaccinated against HBV and received hepatitis B immunoglobulin.

Infants born to mothers who received lamivudine had significantly lower levels of serum HBV DNA than those born to mothers who received placebo. After 52 weeks, fewer infants born to lamivudine-treated mothers were seropositive for hepatitis B surface antigen and their levels of serum HBV DNA remained significantly lower than those of infants born to mothers who received placebo.

Vertical transmission of HBV can be reduced through administration of HBV vaccine and hepatitis B immunoglobulin



to newborn babies. Nevertheless, viral transmission remains a risk, particularly for infants of mothers with high viral loads of HBV. The findings from this study suggest that administration of lamivudine to infected mothers during the last month of pregnancy reduces the rate of HBV transmission; the researchers suggest this treatment could be a useful addition to available management options.

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Original article Xu, W. M. *et al.* Lamivudine in late pregnancy to prevent perinatal transmission of hepatitis B virus infection: a multicentre, randomized, double-blind, placebo-controlled study. *J. Viral Hepat.* **16**, 94–103 (2009).