LETTER TO THE EDITOR

PREVALENCE OF HEPATITIS B CARRIERS

Dear Editor,

I read with interest the article about Prevalence of Hepatitis B carriers in Baglung district Nepal.¹

The article is indeed relevant for a country like ours with significant Hepatitis B problem. It is appreciated that he has tried to draw the attention of Health Policy makers of Nepal for Hepatitis B virus prevention in Baglung, and may be through his citings of datas of different other places,¹ he probably is trying to say that intervention of the whole population is necessary. Obviously, his concerns are worth utmost appreciation. What is inspiring is that now Ministry of Health with help of UN bodies like UNICEF has already started immunisation of children with Hepatitis B vaccine, and that this vaccine is given along with DPT vaccine. This immunization program was started from 2003 and currently the program is implementd in 17 districts and by 2005 the 'Hep. B immunization of children program' will be implemented throughout the nation.⁶ Intimate contact, meaning contamination by any body fluid is risky^{2,4,5} and small children who go to school are specially vulnerable. Children's protection thus is soon going to be ensured. We probably will also have to think of means of protecting the adults too... in the long run.

The author has said that he has tested the blood of 177 people from Baglung seeking employments overseas.¹ He has not stated clearly whether the blood was collected on a field basis in Baglung itself or if the blood was collected or categorized in a clinic in Kathmandu, where people registered their address as Baglung. If latter is the case, it is also possible that the people could have lived most of their lives elsewhere, in which case it would be unfair to project the data on behalf of Baglung district, where people have their own ways of lives distinct from other geographical regions of the country.

As is stated in the article, only 5-10% of the adults infected with Hepatitis B develop the carrier state,³ and given the carrier

state of HBV in the research at 5.08%, does not it hypothetically mean that all of the people enrolled in the test were infected (Provided the disease was not contracted in infancy or childhood).

It is also mentioned that HBsAg is the best marker for prevalence of HBV infection.¹ Well, it is for the carrier state, but certainly not for the infection itself.⁴ Anti HBc is considered to be the best marker of prevalence of Hepatitis B infection.⁴ The antibody initially is the IgM type and later it is the IgG type.^{3,4}

In most of the researches concerned with Hepatitis B, researchers are seen to be resorting to the HBsAg marker, which is negative in 80-90% of those infected after 6 months.^{3,4} If we could screen for Anti HBc instead, that would perhaps be best indicative of infection prevalence in any community.

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6. HMG, Ministry of Health, DOHS—Child Health Division.