MOTHER-TO-CHILD TRANSMISSION OF HBV AND HCV IN MONGOLIA

Bayarmaa Otgonbayar 1, Bekhbold Dashtseren 2, Naranjargal Dashdorj 3, Dahgwahdorj Yagaanbuyant 2

"Ach" Medical College Gastroenterology Ulaanbaatar-Mongolia 1 Mongolian National University of Medical Sciences; Onom Foundation Infectious diseases Ulaanbaatar-Mongolia 2 Onom Foundation Ulaanbaatar-Mongolia 3

Introduction: Mongolia has one of the highest prevalence of hepatitis B, C and D. Consequently, leading mortality rates of liver cirrhosis and hepatocellular carcinoma (HCC) in the world. It is widely accepted that vertical transmission is one of the main routes of transmission. However, currently there are no systemic intervention is given to prevent vertical transmission, except HBV vaccination. In addition, vertical transmission rate has never been studied in Mongolia.

Aim of study: To study mother-to-child transmission rate of HBV and HCV in Mongolia.

Method of Study: This study included 34 subjects, who where born to hepatitis B surface antigen (HBsAg) positive mothers and 18 subjects born to anti-HCV positive mothers. All children and mothers were tested once for the presence of HBsAg and anti-HCV within 2-24 months of delivery.

Results: While two and twenty four months old 2 infants (5.9%) were tested positive for HBsAg, 2-4 months old 8 infants (44.4%) were tested positive for anti-HCV. Only 4 infants were older than 6 months and all of them tested negative for anti-HCV.

Conclusion: This study results indicate that the vertical transmission rate of HBV is relatively high in Mongolia. Therefore, it indicates the need of combination strategy of both passive and active immunoprophylaxis. Further follow-up is needed to determine the vertical transmission rate of HCV infection. It is planned that the subjects who were anti-HCV positive will be tested in every 6 months for 2 years.