

HEP C, MY BABY AND ME

If I have hep C, will my baby get 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 WILL NOT get hep C.

Transmission of hep C occurs through blood-toblood contact, most commonly by injecting drug use, non-sterile tattooing or piercing or non-sterile medical procedures overseas or before 1989.

How will my hep C affect my pregnancy?

If you can keep your liver healthy during your pregnancy then hep C should not have any effects on you or your baby. The same things that keep you and your baby healthy, such as eating well and limiting high fat foods, regular moderate exercise, relaxation, and not drinking alcohol or smoking will also keep your liver healthy. Talk to your health professional about your individual health needs.

Can my partner give the baby hep C?

Your baby cannot get hep C from your partner during sex or conception. Be blood aware in the home once baby is born.

When is it safe for me to start hep C treatment?

You cannot have hep C treatment while you're pregnant or breastfeeding, or while you are trying to get pregnant. There is limited research about the safety of the direct acting antiviral (DAA) medications during pregnancy, and therefore the treatment of pregnant women is not recommended. Speak to your doctor about starting treatment once you have given birth and have finished breastfeeding.

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 factors as a woman without 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 about these before you go into labour.

Can I breastfeed if I have hep C?

You are encouraged to breastfeed your baby even if you have hep C. Hep C is passed via blood-toblood contact and not through breast milk. Temporarily stop breastfeeding, or use one breast if you have a cracked or bleeding nipple. Discard any expressed breast milk while your nipple is cracked or bleeding. Once the breast has healed, you can start breastfeeding again.

To learn more about breastfeeding positions and techniques that may help to prevent getting cracked or nipples that bleed, consult with a lactation consultant or midwife at a maternity hospital or women's health centre.

Do I need to worry about blood loss after I give birth?

It's normal for women to bleed for some time after having a baby. You will be advised to take the same standard precautions around blood and used sanitary products. Bathing with your baby is safe so long as you are not bleeding at the time.



What are standard precuations?

Stand precautions are basic rules for hygiene that everyone should follow, whether or not they have hep C include:

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

How does hep C affect babies and children?

For those few children who do get hep C, it usually doesn't have a big impact on their health. Usually children do not experience any symptoms and rarely need treatment. All Australian's, with a Medicare Card, can access hepatitis C treatment from 18 years of age. Regular 6 monthly check ups are recommended to monitor your child's liver health if they are living with hep C.

Should I have my baby tested for hep C?

There are guidelines about when to test your baby for hep C, and your baby's doctor will talk with you about what is recommended so you are informed about what your baby is being tested for and why.

It's your choice to test your baby. 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 the chance of transmission is rare and they would rather avoid the potential stigma associated with having a medical condition such as hep C during childhood.

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

There are two tests that are needed to give any person a positive hep C result. These are the:

- antibody test which shows if you have ever come into contact with the virus before and
- RNA (or PCR) test which shows is there is still active virus in the blood.

For babies born to mothers who are hep C RNA positive, a blood test should happen at 8 weeks of age, and again at 12 to 14 weeks to confirm a chronic hep C infection. If the baby receives a positive result, she/he has hep C and should be referred to a Liver Clinic for 6 monthly check ups.

Additionally, all babies born to mothers who only have a hep C antibody should be tested at 18 months of age. It is rare for a transmission to happen at birth even if mum's viral load is negative.

Who do I need to tell?

Take some time to think carefully about what and why you would tell someone your baby has hep C. Legally you don't need to tell anyone that you or your baby are living with hep C, this includes telling child care facilities or schools as they have policies in place for infection control.

Information and Support

If you have a question, call Hepatitis QLD InfoLine on 1800 HEP ABC (1800 437 222) or email info@hepqld.asn.au

Other contacts

Australian Breastfeeding Association www.breastfeeding.asn.au, 1800 686 268

Women's Health Queensland www.womhealth.org.au, 1800 017 676

This factsheet was originally produced by The Cairns Hepatitis C Health Promotion Project and is reproduced and updated with permission. Reviewed by Rhondda Lewis, 1/11/2019.