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GAVIN NEWSOM  
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Updated Recommendations for Hepatitis C Testing Among  
 Pregnant Persons and Perinatally Exposed Infants and Children

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Dear Colleague:

The California Department of Public Health, Sexually Transmitted Diseases (STD) Control Branch would like to inform all health care providers in California about new U.S. Centers for Disease Control and Prevention (CDC) [Recommendations for Hepatitis C Testing Among Perinatally Exposed Infants and Children](#).

Since 2012, acute hepatitis C virus (HCV) infections have [increased nationally](#) among persons aged 20-49 years, including those who can become pregnant. Between 2014 and 2018 (the last available public data), the [rate of newly reported chronic hepatitis C infections](#) in California increased among females 15-39 years of age, suggesting an increased need to identify infants with potential perinatal exposure to hepatitis C. While the U.S. Preventive Services Task Force (USPSTF) [recommends](#) universal HCV screening for adults 18-79 years of age, which includes pregnant persons, both the American College of Obstetricians and Gynecologists ([ACOG](#)) and [CDC](#) recommend screening all pregnant persons *during each pregnancy* (except in settings in which the prevalence of HCV infection is < 0.1%). The [prevalence of hepatitis C](#) in California is estimated to be 1.08%<sup>a</sup>.

For infants (and children) at risk of perinatal HCV exposure during pregnancy or childbirth, CDC released updated recommendations to clarify when (Table 1) and how (Table 2) to test for hepatitis C, with the general recommendation of **HCV testing for all infants and children born to pregnant persons with current or probable HCV infection**.

Table 1: HCV Testing Recommendations for Perinatally Exposed Infants, by Birthing Parent Test Result Status

Birthing Parent HCV Antibody (anti-HCV) Status	Birthing Parent HCV RNA (viral load) Status	Infant or Child Testing Recommended
Reactive	Detected	Yes
Reactive	Missing/unknown	Yes
Reactive	Not detected	No

<sup>a</sup> Prevalence of HCV varies across specific settings in California (e.g., primary care clinics, correctional facilities, and emergency rooms). Piloting HCV screening can help provide specific prevalence estimates in a given healthcare setting.



Table 2: HCV Tests Indicated for Perinatally Exposed Infants and Children, by Infant/Child Age and Test Type

Infant/Child Age	HCV Antibody (anti-HCV) Test <sup>b</sup>	HCV RNA (viral load) Test
2-6 months <sup>c</sup>	No	Yes
7-17 months	No	Yes <sup>d</sup>
≥ 18 months <sup>e</sup>	Yes	Yes <sup>d</sup>

### Clinical Management and Treatment for Children Diagnosed with Hepatitis C and Their Siblings

Infants and children with current hepatitis C infection (i.e., detectable HCV RNA) should be routinely monitored for disease progression and managed in consultation with a healthcare provider with expertise in pediatric hepatitis C management. [National clinical guidelines](#) also recommend:

- Test children diagnosed with HCV infection for concomitant hepatitis B virus (HBV, per [Association for the Advanced Study of Liver Diseases guidelines](#)) and HIV (per [National Institutes of Health guidelines](#))
- Test for HCV in siblings of children with perinatal HCV infection born to the same gestational parent.
- Link children still infected with hepatitis C at 3 years of age or older to curative care with HCV direct-acting antiviral (DAA) therapies approved by the U.S. Food and Drug Administration (FDA) for children ≥ 3 years of age. For more information on managing hepatitis C in children, visit [HCV in Children](#).

### Hepatitis C Treatment in Pregnancy and Postpartum

Hepatitis C treatment is not yet FDA approved for persons who are currently pregnant. However, persons with hepatitis C infection who have given birth should receive DAA therapy before becoming pregnant again to promote their health and prevent perinatal HCV transmission in subsequent pregnancies. For more information on managing hepatitis C in pregnancy, visit [HCV in Pregnancy](#).

According to AASLD, “despite the lack of a recommendation, treatment can be considered during pregnancy on an individual basis after a patient-physician discussion about the potential risks and benefits.” Treatment during pregnancy should be entered into the Treatment In Pregnancy for Hepatitis C Registry, a CDC-supported initiative to record outcomes of mother (birthing parent)-infant pairs exposed to DAAs during pregnancy. For more information, visit [Treatment In Pregnancy for Hepatitis C \(Tip-HepC\) Registry](#).

Please see the resources below for more information or contact [stdcb@cdph.ca.gov](mailto:stdcb@cdph.ca.gov) with any questions.

Sincerely,



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Chief, STD Control Branch

<sup>b</sup> HCV antibody testing for children under 18 months of age is not recommended due to transient gestational parent HCV antibody.

<sup>c</sup> Reliability of detecting HCV RNA before two months of age has not been established. Testing infants and children 2-6 months of age with a nucleic acid test (NAT) for HCV RNA may reduce loss to follow-up (rather than waiting to test for HCV antibody [with reflex to HCV RNA] at 18 months). Those with an undetectable HCV RNA do not require follow-up testing unless clinically indicated.

<sup>d</sup> If child not already tested for HCV RNA.

<sup>e</sup> Children ≥18 months of age not previously tested should receive an HCV antibody test with reflex to NAT for HCV RNA.

## Resources

- [CDC Recommendations for Hepatitis C Testing Among Perinatally Exposed Infants and Children — United States, 2023](#)
- USPSTF: [Recommendation: Hepatitis C Virus Infection in Adolescents and Adults: Screening | United States Preventive Services Taskforce](#)
- ACOG: [Viral Hepatitis in Pregnancy | American College of Obstetricians and Gynecologists](#)
- AASLD: [Association for the Study of Liver Diseases and Infectious Disease Society of America, HCV Guidelines:](#)
  - [HCV in Children](#)
  - [HCV in Pregnancy](#)
- NIH: [Diagnosis of HIV Infection in Infants and Children | National Institute of Health](#)
- NCCC: [National Clinical Consultation Center, Hepatitis C Warmline](#), 1 (844) HEP-INFO or (844) 437-4636
- [Treatment In Pregnancy for Hepatitis C \(Tip-HepC\) Registry](#)