# Anchor University Journal of Science and Technology (AUJST)

A publication of the Faculty of Science and Science Education, Anchor University Lagos





Vol. 1 No 1, June 2020, Pp. 31 - 34



# Incidence of Hepatitis B Virus Infection among Women Attending Antenatal Care in General Hospital Aliero, Kebbi State, Nigeria

<sup>1</sup>Isah, M.\*, <sup>2</sup>Abdulkadir, B., <sup>1</sup>Attahiru, B., <sup>1</sup>Abubakar, F.T. and <sup>3</sup>Salisu, U.

<sup>1</sup>Department of Microbiology, Kebbi State University of Science and Technology, Aliero. <sup>2</sup>Department of Microbiology, Ummaru Musa Yaradua University Katsina, Katsina State. <sup>3</sup>School of Nursing and Midwifery Gusau, Zamfara State.

#### \*Corresponding author:

Phone: +234 (0) 703 161 8726, E-mail: isahmg97@gmail.com

Submitted 22 April, 2020 Accepted 13 June, 2020

**Competing Interests:** The authors declare no competing financial interests.

#### **ABSTRACT**

**Background:** Hepatitis B is one of the most common infectious diseases that is easily transmitted among the population.

Objectives: This study was conducted to determine the incidence of Hepatitis B viral infection among women attending antenatal care, in general hospital Aliero.

Methods: Blood samples were collected from 110 subjects and investigated using a diagnostic strip (HBsAg strip) designed for the determination of Hepatitis B Surface Antigen in human blood samples (serum).

**Results:** Out of 110 samples investigated eight (7.3%) were found to be positive for hepatitis B infection. Based on age, the highest incidence of hepatitis B infection was observed among the age group 15-24 (4.55%) followed by 25-34 (1.82%) and lastly 35-44 (0.91%).

Conclusions: The infection rate was found to be related to the low level of education, awareness and the poor standard of living observed among the subjects. It is therefore recommended that sensitization lectures in the study area should be geared towards creating awareness, mode of transmission, immunization and other ways of controlling hepatitis B viral infec-

**Keywords**: Hepatitis, incidence, infection, immunization, transmission

#### INTRODUCTION

Hepatitis means liver inflammation; it is a contagious disease of the liver usually caused by many agents including viruses, toxic agents or drugs. Infection caused by the hepatitis B virus (HBV) is life-threatening causing about 2 billion infections in the world (Tong et al., 2005). There are six main hepatitis viruses, referred to as type A, B, C, D, E and G. These six types are of greatest concern because of the high rate of morbidity and mortality they cause and the potential for outbreaks spread. Hepatitis B is a serious disease which constitutes a global public health problem (Obi et al., 2006). Acute infection may be asymptomatic or may include clinical symptoms such as jaundice, black vomitus, dark urine, severe fatigue, abdominal pain and nausea (Barker, 2006). Routes of infection include vertical transmission (from infected mother to her baby through the placenta and during delivery) and horizontal transmission (after birth) which can be at early life or adolescent period (Custer et al., 2004). The primary way of transmission determines the prevalence of chronic Hepatitis

B infection in a given region. For instance, in low prevalence rate areas such as the USA and Western Europe, injection, overuse of drugs and unprotected sex with multiple partners are the primary ways, although there are other ways which are also deemed important (Redd et al., 2007).

The discovery of HBV leads to the introduction of the first-ever noble vaccine not prepared by tissue culture technique but initially directly from blood plasma and which soon became the first vaccine produced by genetic engineering (Alter, 2004). Hepatitis B virus infection has resulted in several health challenges in part of Asia and Africa and it is endemic in China (Williams, 2006). According to the recent findings by the world health organization, more than two billion people are infected with the hepatitis B virus globally (Chang, 2007). Many research has been carried out on incidence and prevalence of Hepatitis B infection around the globe with varying HBV positive status depending on population or

sub-population studied and adopted methods used.

The incidence and prevalence rate of HBsAg among women attending ANC varies from one region to another. The incidence and prevalence of chronic HBV infection were estimated to be 3.5% among women of reproductive age worldwide (Ott *et al.*, 2012). In African countries, the rate of HBV infection ranges within 6–25% (Ott *et al.*, 2012). In Nigeria national survey of hepatitis B prevalence among the general population was conducted and the infection rate of 12.2% was reported (Olayinka *et al.*, 2016).

Despite Nigeria being categorized among developing countries where hepatitis B infection is highly endemic (Shepard *et al.*, 2017), there is still negligence in proper blood screening for women attending ANC and lack of proper awareness campaigns on HBV infection in most of our primary and secondary health care centers. This research aimed at determining the incidence rate of hepatitis B infection among women attending antenatal care (ANC) in the General Hospital, Aliero LGA.

#### MATERIALS AND METHODS

#### **Study Area**

Aliero is a Local Government Area in Kebbi State, Nigeria. Its headquarters are in the town of Aliero, with a total landmass of 350Km² and an estimated population of 65,973 at the 2006 census (NPC, 2006). It is bounded in the North-East by Gwandu Local Government Area, in the south by Jega Local Government, in the East by Tambuwal Local Government Area of Sokoto State, in the North-West by Birnin Kebbi Local Government Area. Farming is the predominant occupation of Aliero people.

# **Study Population**

One hundred and ten (110) blood samples were collected from the subjects (women receiving antenatal care) in General hospital, Aliero. The study covered the age groups between 15 and 44 years.

# Study Design/Sample and Data Collection

A cross-sectional study was carried out among pregnant women receiving antenatal care at general hospital Aliero LGA between April and May 2018. Two milliliters (2ml) of blood was collected using venipuncture from each pregnant woman that gave consent. The blood samples collected were dispensed

into sample bottles containing EDTA. The samples were spin and separated, the sera obtained were stored frozen for the subsequent analysis. The questionnaire was also administered to obtain information on socio-demographic characteristics, level of education, hygiene standard, history of vaccination and blood transfusion.

# Sample processing

In vitro diagnostic strip, (one step Hepatitis B surface antigen test strip designed for the qualitative determination of HBsAg in human serum) was used to determine the status of the subjects to HBV. The procedure was carried out following the manufacturer's instructions. Positive samples show a double red-colored band, one at the test (T) and the other at the control (C) region while negative samples show a single red-colored band only at the control (C) region.

#### **Inclusion criteria**

Pregnant women who gave consent to participate in this study.

#### **Exclusion criteria**

Pregnant women that chose not to participate in the exercise and those who were immunized against hepatitis B infection (confirmed verbally).

# Statistical analysis

The data obtained from the study were analyzed using "IBM SPSS SOFTWARE VERSION 20" to determine percentage positive frequency.

### **RESULTS**

# Percentage positive of subjects screened for Hepatitis B Virus

The distribution cases of HBsAg among pregnant women in General hospital Aliero, Kebbi state shows that out of the 110 blood samples tested, eight 8 (7.3%) subjects were found to be positive, and 102 (92.7%) were negative. Out of 8 positive subjects, 5 (62.5%) were from age range 15-24, 2(25.0%) from 25-34 and 1 (12.5%) from age group 35-44. Table 1.

# Incidence of Hepatitis B virus according to age group

The distribution cases of Hepatitis B among

pregnant women in General Hospital Aliero, Kebbi state. Out of 110 pregnant women who participated in the study (n=110), eight (8) were found to be positive and the incidence distribution based on the number of subjects examined per age group were, 15-24 (4.55%) with the highest incidence, followed by 25-34(1.82%) and 35-44 (0.91%) as shown in Table 2.

#### **DISCUSSION**

Hepatitis B virus infection remains a threat to public health worldwide, especially in developing countries. Immune suppression during pregnancy is of clinical and epidemiological importance with regards to HBV infection (Oluboyo et al., 2014). The result of our study revealed that the incidence rate of HBV infection among the subjects attending ANC in General Hospital Aliero, Kebbi state is >7%. The result, therefore, corroborates with an earlier report by Juszozyk, (2000) and is also in agreement with an incidence rate of 6-25% in the WHO African region. The distribution of HBV infection by age indicate that the age group 15-24 years recorded the highest rate of infection (4.55%), this result agrees with earlier findings by Adabara et al. (2012) that the higher rate of HBV infection was recorded among the age group 20-29 years with 10.3%, this could be attributed to the fact that age group (15-24 years) are sexually active and may have been involved in unprotected sex with multiple partners. Studies have revealed that the common route of HBV transmission is through blood transfusion and unprotected sex (El -Deeb et al., 2008). Several studies reported that poor hygiene practice and lack of awareness about HBV infection have also contributed significantly to the high rate of infection among the population (Kurbanov et al., 2010). The incidence is however lower than a similar study carried out in Bayara hospital, Bauchi State where the infection rate of 17.2% was reported (Ndako et al., 2012). Despite both research were conducted at secondary health care centers, the difference could be due to study design,

**Table 1.** Percentage positive of subjects screened for Hepatitis B Virus

Age	Positive	Incidence %
15-24	5	62.5
25-34	2	25.0
35-44	1	12.5
Total	8	100

regional and population-specific variations. However, the incidence rate in this study is higher than the rate of 4.3% earlier reported in Portharcout (Akani *et al.*, 2005), and 2.19% in Benin City (Onakewhor *et al.*, 2001).

Considering the overall incidence, it can be deduced that Aliero local government has an incidence rate of 7.3% which is an average value for the northern region with Maiduguri and Zaria having the higher rate of 11.6% and 8.3% respectively (Harry *et al.*, 1994; Luka *et al.*, 2008).

#### **CONCLUSION**

In conclusion, the incidence rate of HBV infection among pregnant women attending ANC in general hospital Aliero was 7.3% and the age group 15-24 years had the highest incidence rate of 4.55%, this indicated that HBV infection is endemic in Nigeria especially in the northern region. It is hereby recommended that free hepatitis B screening for women attending antenatal care should be emphasized. Furthermore, awareness campaigns on the effect of hepatitis B virus infection and the importance of immunization to the society are encouraged. Further study to follow up cases of HBsAg positive pregnant women is also significantly important.

**Table 2.** Distribution of Hepatitis B virus according to age group

Age	Number of Blood	Number of Positive	Incidence (%)
	Samples Collected	Samples	
15-24	50	05	4.55
25-34	35	02	1.82
35-44	25	01	0.91
Total	110	08	

#### **REFERENCES**

Adabara, N. U., Ajala, O.O., Momohjimoh, A., Hashimu, Z. and Agabi, AYV. (2012). Prevalence of Hepatitis B Virus among Women attending ANC in the General Hospital Minna, Niger State. *Shiraz E Medical Journal* Vol. 12 (13): 28-32.

Akani, C. I., Ojule, A. C., Opurum, H. C. and Ejilemele, A. A. (2005). Seroprevalence of HBsAg in pregnant women in Port Harcourt. Nigeria. *Nigeria Postgraduate Medical Journal*, 12 (4): 266-270.

- Alter, M. J. and mast, E. N. (2004). The epidemiology of viral hepatitis in North American States. *Gastroentrology.* **23**:437-2455.
- Barker, L. F. (2006). Transmission of serum hepatitis. *Journal of the American Medical Association*. **276**(10):841-844.
- Chang, M. (2007). "Hepatitis B virus infection". Seminars in fetal and neonatal medicine 12 (3): 160–167.
- Custer, Sullivan, S.D., Hazlet, T.K., Iloeje, U., Veenstra, D.L. and Kowdley, K.V. (2004). "Global epidemiology of hepatitis B virus". *Journal of clinical gastroenterology* 38 (1): 158–168.
- El-Deeb, A. S., Hassan, M. M., and Li, D. (2008). Association between Hepatitis B virus and pancreatic cancer. *Journal of clinical oncology*. **26**(28):4557-4562.
- Harry, T.O., Bajani, M.D. and Moses, A.E. (1994). Hepatitis B virus infection among blood donors and pregnant women in Maiduguri, Nigeria. *East Africa Medical Journal*, 70: 596-597.
- Juszozyk, J. (2000). Clinical Course and consequence of Hepatitis B infection. Vaccine, 18:23-25.
- Kurbanov, F., Tanka, Y. and Mizokami, M. (2010). Geogrphical and gemetic diversity of the *human hepatitis B virus. Hepatology research.* The official journal of japan society of hepatology. **40**(1):14-30.
- Luka, S.A., Ibrahim, M.B. and Iliya, S.N. (2008). Seroprevalence of hepatitis B surface antigen among pregnant women attending Ahmadu Bello University Teaching hospital, Zaria, Nigeria. *Nigerian Journal of Parasitology*, 29 (1): 38-41.
- Ndako J, Echeonwu G, Nwankiti O, Onovoh E, Ujah A, and Ikani P. (2012). Hepatitis B virus Sero prevalence among pregnant females in Nothern Nigeria. *Res. J. Med. Sci.* 6(3):129–33.
- NPC, (2006). National Population Commission; Population and Housing Census, Population distribution in Sex, State, LGA and Senatorial. http://www.population.gov.ng
- Obi, R.K., Umeh, S.C., Okurede, O.H., Iroagba, I.I. (2006). Prevalence of hepatitis B virus infection among pregnant women in antenatal clinic in PortHarcourt, Nigeria. *African Journal of Experimental Microbiology* 7 (2): 78-82.
- Olayinka, A.T., Oyemakinde, A., Balogun. M.S., Ajudua, A., Nguku, P., Aderinola, M. (2016). Seroprevalence of hepatitis B infection in Nigeria: a national survey. *Am J Trop Med Hyg.* 95(4):902–7.

- Oluboyo, B., Ugochukwu, V., Oluboyo, A., Ihim, A., Chukwuma, G. and Ogenyi, S. (2014). Prevalence of hepatitis B and C viral infections in pregnant women attending antenatal clinic in Nnewi, Nigeria. *Eur Sci J.* 10(3):434–41.
- Onakewhor, J.U.E., Offor, E. and Okonofua, F.E. (2001). Maternal and neonatal sero-prevalence of Hepatitis B surface antigen (HBsAg) in Benin City. *Journal of Obstetrics and Gynecology*, 21 (6): 583-586.
- Ott, J.J., Stevens, G.A., Groeger, J. and Wiersma, S.T. (2012). Global epidemiology of hepatitis B virus infection: new estimates of age-specific HBsAg seroprevalence and endemicity. *Vaccine*. 30(12):2212–9 Elsevier Ltd.
- Redd, J., Baumbach, J., Kohn, W., Nainan, O., Khristova, M. and Williams, I. (2007). "Patient-to-patient transmission of hepatitis B virus associated with oral surgery "*The Journal of infectious diseases* 195 (9): 1311–1314.
- Shepard, C.W., Simard, E.P., Finelli, L., Fiore, A.E. and Bell, B.P. (2017). Hepatitis B virus infection: epidemiology and vaccination. Johns Hopkins Bloom Sch Public Health. 28(October):112–25
- Tong, S., Kim, K.H., Chante, C., Wands, J. and Li, J. (2005). Hepatitis B virus the antigen variants. *International Journal of Medical Science*. 2:2-7.
- Williams, R. (2006). "Global challenges in liver disease". Hepatology (Baltimore, Md.) 44 (3): 521–526.