have not shown a significant decrease in transmission of infection.\textsuperscript{13} To prevent transmission, all infants born to HBsAg-positive mothers should receive the hepatitis B vaccine series as well as the hepatitis B immunoglobulin within 12 hours of giving birth. Breastfeeding is generally encouraged after the hepatitis B immunoglobulin has been given; however, there have been some studies that indicate that HBV can be transmitted via breast milk and that the mother should be instructed to take good care of her nipples to prevent cracking and bleeding, which can increase the risk of transmission.\textsuperscript{9}

**KEY POINTS**

- Chronic HBV infection does not increase morbidity and mortality in the setting of stable liver disease.
- The main risk associated with chronic infection is vertical transmission to the neonate, which can be prevented with both the vaccine series and the administration of hepatitis B immunoglobulin.
- Antiviral treatment during pregnancy has not been well-studied but may be effective in the last month of pregnancy.

### CHRONIC HEPATITIS C

In contrast to chronic HBV infection, chronic hepatitis C virus (HCV) is associated with a lower risk of vertical transmission with rates between 4% and 10%; therefore, it is typically only recommended to perform HCV antibody screening in women with risk factors for infection, including a history of intravenous drug use or prior blood transfusions as well as tattoos or body piercings.\textsuperscript{9} Patients with chronic HCV infection do not have an increased risk of adverse outcomes if their liver disease is well-controlled. As with HBV infection, the main risk for vertical transmission occurs in patients with higher viral levels during their pregnancy.\textsuperscript{14} Additionally, patients with HIV co-infection are at an increased risk for perinatal transmission, which is thought to be due to impaired immune function leading to a higher rate of HCV viral replication. In these patients, antiretroviral treatment for HIV decreases the rate of HCV transmission to that of non-HIV-infected patients.\textsuperscript{15} Conversely, antiviral treatment for HCV is not currently