Sir, Haemodialysis patients constitute a high risk population for HBV infection because of frequent blood transfusion and sharing of haemodialysis machine. To determine the frequency of HBV infection in haemodialysis patients and see the antibody response following vaccination we selected 65 patients from a major haemodialysis unit where vaccination for HBV infection is not mandatory and selected 37 patients from another haemodialysis unit where all patients are initially screened for HBsAg and HBcIgG antibodies before RB vaccination and putting on machine. All samples were tested on Auszyme kit (Abbott Laboratories) for hepatitis B surface antigens. Fifteen (23%) non-vaccinated patients and 2 (5.4%) vaccinated patients showed REV infection. Prevalence of 23% HBV infection in non-vaccinated and 5.4% in vaccinated population is very alarming therefore all haemodialysis patients should first be screened for HBsAg and hepatitis B core IgG antibodies and all susceptible candidates should be vaccinated. After complete vaccination every patient should be screened for anti-HBs antibody titres to determine immunological response. In non-responsive patient, higher and frequent dosage of vaccine may be tried. In responsive patients antibody titre should be monitored. As soon as antibody titre drops below 100 I.U.; they should be given a booster dose of the vaccine. All hepatitis B virus exposed patients should immediately be shifted to a separate machine reserved for such patients. Strict adherence to disinfection protocols and sterile techniques in dialysis unit are extremely important.

Syed Abdul Mujeeb, Mubashir Ahmed Shaikh* and Shahnaz Imdad Kehar*
Blood Transfusion Services and Department of Clinical Pathology*, Jinnah Postgraduate Medical Centre, Karachi.

References