

Review of: "Sero-prevalence of Viral Hepatitis B and C infection and associated factors among Pregnant Women in Southeast Ethiopia: Community-based crossectional study"

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Potential competing interests: No potential competing interests to declare.

This is an interesting study describing the prevalence of hepatitis B virus surface antigen and hepatitis C virus antibody positivity among pregnant women in Ethiopia. Overall this is an important study as it addresses a public health knowledge gap concerning the up to date prevalence of HCV and HBV among pregnant women in Ethiopia. The authors point out that Ethiopia's nationwide survey data has not been updated for three decades, highlighting the importance of this study. HCV and HBV in pregnancy are of particular concern as 1) detection of infection can indicate potential for illness in mother and transmission to the baby and 2) both infections can be managed through interventions. Using HBVsAg test (BioPanda) and HCV Ab test ("Best one stage HCV test strip") and demographic/clinical data the authors find 7.6% HBVsAg positive and 2.2% HCV Ab positive, 0.24% HBVsAg and HCV Ab positive, with adjusted odds ratio for HBV finding sexually transmitted infection, prior hospital admit, household contact as HBV risks and blood transfusion, family contact as risk for HCV Ab positivity.

Comments

Many of my comments/critiques have been summarized by other reviewers above, including formatting such as use of HBsAg instead of HBsAgn and clearly stating that HCV Ab tests for HCV exposure, but does not diagnose active HCV infection. Women who are HCV Ab positive may be actively infected or may have spontaneously cleared, and this clarification should be added early on (in addition to the later mention you have already included of a need for future molecular testing, where it would help to also state, "including both HBV DNA and HCV RNA PCR studies"). For the general global audience, it might also help to add a sentence or two describing which HBV and HCV antiviral regimens are available for women who may need treatment. Finally, in the discussion section where household contacts are mentioned I believe the word "incongruent" is being misused and the authors mean to say "similar".

Overall, with the minor edits suggested above and those mentioned here I believe this is an important study, highlighting a public health problem that is important to highlight because the tools to treat HBV and HCV, and to prevent mother to child transmission, exist, and the finding of potential hospital/procedure and household contact related hepatitis virus exposure risk highlights a public health problem that can be addressed. Thank you for including me as a reviewer on this interesting work.

