



Info line

Donate

About us	Hepatitis information	How to get help	Get involved	Our work	New	Workforce
Who we	Liver Health	COVID-19	Donate	Hepatitis R	Services	Community
Our Team	Hepatitis A	Hepatitis Inf	Share you	Program	Lates	Professiona
Our Board	Hepatitis B	Your Rights and Responsibilities		Hepatitis Program	Media	Training Opportunities
Our Members	Hepatitis C	For friends and family		Policy and Advocacy		
Corporate documents	Hepatitis Statistics	Local hepatitis organisations			Our publications	
Our website	Other Languages				World Hepatitis Day	

Contacting Us If you are “just a healthy carrier”, read on for a myth-busting update.

Acute versus chronic

When a person is first infected with the hepatitis B virus, it’s called an **acute infection**. If that person cannot get rid of the infection after six months, then this becomes a **chronic infection**, which is lifelong¹.

In the past, people who seemed well despite chronic infection were labelled “healthy carriers”. However, this term is inaccurate as people with chronic hepatitis B:

- risk transmitting hepatitis B to others such as close contacts, sexual partners and unborn babies.
- have nearly a one in four risk of dying from cirrhosis, liver cancer or liver failure².

If tattoos could talk
Latest...

Parliamentary Morning Tea: We can eliminate hepatitis C!

The Parliamentary Friends Group for Action of Blood Borne Viruses Co-Chairs, Tim Wilson, MP and Senator Louise Pratt invite you to a Parliamentary Morning Tea on Thursday 12 November.

Renewed calls for Needle & Syringe Programs in prisons ahead of International Drug Users Day

The Australian Injecting and Illicit Drug Users League (AIVL) and Hepatitis Australia are highlighting international calls for Needle and Syringe Programs (NSPs) in prisons, along with a greater focus on harm reduction

Where did the term “healthy carrier” come from?

The term “carriers” was initially used to identify people found to have the hepatitis B virus in their bloodstream for six months.

However, these “carriers” varied widely. Some were highly contagious, some had no symptoms, and some had significant liver disease.

In simple terms, we didn’t understand the hepatitis B virus very well.

This led to many people being told by doctors that they were “just healthy carriers” and that they needed no follow up. Others were told their infection had “resolved” or was “inactive”, without being warned that it may reactivate, even without symptoms³.

Why we should stop using the term “healthy carrier”

Some people still use this term even though it is unhelpful. Some possible consequences include:

- People may miss out on receiving proper healthcare if they hold a false belief that they are healthy.
- People who describe themselves as healthy carriers may feel they are less likely to experience stigma and discrimination⁴ than those who say they have chronic hepatitis B virus. Unfortunately, this can actually increase stigma surrounding the condition by making it more hidden. You may like to read more about your rights and responsibilities on [this page](#), or by phoning the [Hepatitis Infoline](#).
- Using the term “healthy carriers” might falsely imply that there are additional ways of passing on the virus as well as the usual transmission routes, or that

initiatives, ahead of International Drug Users Day on 1 November.

Investment in hepatitis research needs to be accompanied by National Strategy implementation funding

6 October 2020 - Hepatitis Australia welcomes the Australian Government’s commitment to diverse hepatitis research, however we remain concerned that the 2019 Health Budget funding for hepatitis commitments is yet to hit the ground.

Related

Hepatitis B Guide

Testing, treatment and staying healthy. This guide is to help you understand the process from being tested for hepatitis B (often called hep B) to living well with chronic (life-long) hep B.

What is hepatitis B?

Basic information about hepatitis B transmission and how it affects people.

Hepatitis B vaccination

Hepatitis B can be prevented with a safe and effective vaccine.

Most read

Coronavirus COVID-19 factsheet for people with

healthy carriers are unlikely to transmit the infection to others.

What we know now

The reason people with chronic hepatitis B vary widely is that hepatitis B has four identifiable phases⁵:

Silent	Immune tolerance (phase 1)	Hepatitis B virus is replicating but there is no active liver damage.
Damage	Immune clearance (phase 2)	Hepatitis B virus is attacking the immune system and the immune system is fighting back. Liver is getting damaged.
Control	Immune control (phase 3)	Immune system has virus under control and there is no further liver damage.
Escape	Immune escape (phase 4)	Virus is active again and liver is being damaged.

Your doctor can order tests* to see which phase your hepatitis B is in, and therefore

hepatitis B and hepatitis C

Hepatitis Australia has put together a brief factsheet with information about the coronavirus COVID-19 for people living with hepatitis B and hepatitis C.

Hepatitis A

Basic information about hepatitis A in Australia

COVID-19

Information on the coronavirus COVID-19 for people affected by hepatitis B or hepatitis C.

what screening and/or treatment would be best. You should visit your doctor for liver check-ups every six months to reduce the risk of liver damage.

Screening may comprise blood tests, or scans such as liver ultrasound and ultrasound elastography (commonly known as Fibroscan®).

Treatment may be anti-viral replication medication, or interferons to stimulate immune control⁷ - as well as other actions like having a healthy lifestyle.

Living with hepatitis B

The goal of screening and treatment is to prevent, stop or even reverse the effects of hepatitis B on your liver⁷.

Screening is important for all people who have hepatitis B. One study found that more than one-third of people with chronic hepatitis B lived much longer if they had six-monthly screening, compared to no screening⁶.

In general, treatment is recommended to people whose hepatitis B is in the Damage (phase 2) and Escape (phase 4) phases, and all those with cirrhosis which is a severe form of liver scarring⁷.

International research shows that appropriate treatment for chronic hepatitis B can reduce the risk of liver cancer by up to three-quarters⁸. Treatment also reduces risk of transmission to others, and most importantly, gives you the best chance to live a long and healthy life.

You can find out more about testing, monitoring and treatment [here](#).

This content was written by Dr Alice Lam for Hepatitis Australia. Dr Lam is an

Australian General Practitioner (GP) with experience dealing with hepatitis B.

References

1. Hepatitis B Foundation. 2019. Acute vs. Chronic Infection. [ONLINE] Available at: <https://www.hepb.org/what-is-hepatitis-b/what-is-hepb/acute-vs-chronic/>. [Accessed 3 October 2019].
2. Australasian Society for HIV Medicine. 2019. Prevalence and epidemiology of hepatitis B. [ONLINE] Available at: <http://54.66.239.154/prevalence-and-epidemiology-of-hepatitis-b/>. [Accessed 3 October 2019].
3. Hoofnagle, J., 1987. Chronic Type B Hepatitis and the "Healthy" HBsAg Carrier State. *Hepatology*, [Online]. 7/4, 758-763. Available at: <https://aasldpubs.onlinelibrary.wiley.com/doi/pdf/10.1002/hep.1840070424>[Accessed 3 October 2019].
4. Ellard, J., 2013. Stigma, Discrimination and Hepatitis B - A review of current research. *Australian Research Centre in Sex, Health & Society (ARCSHS)*, [Online]. Available at: <https://siren.org.au/wp-content/uploads/2016/08/Stigma-Discrimination-and-Hepatitis-B-A-review-of-current-research.pdf>[Accessed 18 November 2019].
5. Chronic Hepatitis B: Phases (2018). [ebook] Available at: https://www.hepqld.asn.au/wp-content/uploads/2018/06/FACTSHEET_-_Chronic_Hepatitis_B_Phases-1.pdf [Accessed 13 Nov. 2019].
6. Zhang, B., 2004. Randomized controlled trial of screening for hepatocellular carcinoma. *Journal of Cancer Research and Clinical Oncology*, [Online]. 130(7), 417-22. Available at: <https://www.ncbi.nlm.nih.gov/pubme>

[d/15042359](#)[Accessed 21 November 2019].

7. Australasian Society for HIV Medicine. 2018. Treatment of chronic hepatitis B virus infection. [ONLINE] Available at: <http://54.66.239.154/treatment-of-chronic-hepatitis-b-virus-infection/>. [Accessed 3 October 2019].
8. Cancer Council Victoria. N.D. Hepatitis and liver cancer. [ONLINE] Available at: <https://www.cancervic.org.au/for-health-professionals/community-health-professionals/hepatitis-b-and-liver-cancer>. [Accessed 3 October 2019].

* As the range of HBV tests can be confusing, your GP may appreciate being pointed to this handy [decision-making aid](#).

Last updated

9 December 2019

Share this page



Join our mailing list

First Name *

Last Name *

Email Address *

Subscribe

Interests

Health Care Worker / Educator

World Hepatitis Day

Info

Hepatitis Australia is a registered charity.

Helpful links

[Contact us](#)
[Full sitemap](#)

Member sites

[Australian Capital Territory](#)
[New South Wales](#)



- [Accessibility](#)
- [Terms & conditions](#)
- [Privacy policy](#)
- [Login](#)

- [Northern Territory](#)
- [South Australia](#)
- [Victoria](#)
- [Queensland](#)
- [Western Australia](#)
- [Tasmania](#)

ABN: 38 442 686 487

© Copyright 2019
Hepatitis Australia.
All rights reserved.
[View our copyright statement here](#)

Information provided on this website is for general information only and not intended as medical advice. Hepatitis Australia encourages all readers to seek independent medical advice before making any decisions based on the information provided on this website.

Hepatitis Australia is a partner organisation of healthdirect Australia.



This site complies with the HONcode standard for trustworthy health information: [verify here](#).
Search only trustworthy HONcode health websites:

Search

Images used on this site may include stock photos and the associated messaging may not represent the personal situation, views or beliefs of the people in the images.