

injections which are given into the upper arm over a period of six months. A simple blood test will be taken at the end of the course of injections to check the level of antibodies. Sometimes with chronic kidney disease it is harder to produce the antibodies and a second course of three injections or a booster of the vaccine may be needed.

Once the full course has been completed you will have your antibody levels checked every year and further boosters will be given if required.

As with any vaccine or medication there may be some people who experience side effects. These are however rare. The most common are discomfort, redness and slight swelling at the site of the injection, or mild fever. These should only last for a couple of days.

If you have any questions about vaccination, please talk to your kidney doctor or nurse.

## Where can I find further sources of information?

Further information can be obtained from:

The National Kidney Federation  
[www.kidney.org.uk](http://www.kidney.org.uk)

NHS Choices [www.nhs.uk](http://www.nhs.uk)

The Kidney Patient Guide  
[www.kidneypatientguide.org.uk](http://www.kidneypatientguide.org.uk)

You will also find local information leaflets within the different renal departments. A wide range of patient information leaflet and fact sheets are available through the University Hospitals Birmingham NHS Foundation Trust website and can be accessed via:

[www.uhb.nhs.uk/renal](http://www.uhb.nhs.uk/renal)

## References

Department of Health (2002) Good practice guidelines for renal dialysis/transplantation units. Prevention and control of blood-borne virus infection.



The Trust provides free monthly health talks on a variety of medical conditions and treatments. For more information visit [www.uhb.nhs.uk/health-talks.htm](http://www.uhb.nhs.uk/health-talks.htm) or call 0121 371 4323.

---

### Renal Unit

Queen Elizabeth Hospital Birmingham  
Mindelsohn Way, Edgbaston  
Birmingham, B15 2GW  
Telephone: 0121 627 2000

---



**Hepatitis B,  
hepatitis C and  
HIV testing for  
people with chronic  
kidney disease and  
those on dialysis**

Delivering the best in care

**UHB is a no smoking Trust**

To see all of our current patient information leaflets please visit  
[www.uhb.nhs.uk/patient-information-leaflets.htm](http://www.uhb.nhs.uk/patient-information-leaflets.htm)

## Introduction

This leaflet provides information and explains why blood tests to check for the presence of certain infections are needed for people who have chronic kidney disease and those on dialysis treatment.

If you have any questions please speak with your kidney doctor or nurse.

## What blood tests are needed?

It is recommended and good practice to test all people on dialysis treatment and those where dialysis or transplantation is being planned, for certain infections in the blood. These infections include hepatitis B, hepatitis C and the human immunodeficiency virus (HIV).

## Why are these blood tests needed?

During dialysis treatment bodily fluids are removed as part of the blood cleaning process. In haemodialysis, blood is taken from the body to enable it to be cleaned using a dialysis machine, and then returned. In peritoneal dialysis, fluid is drained into and out of the peritoneal cavity in the abdomen. It is possible that exposure to these body fluids can cause infection in other patients and staff. The testing

is therefore important in helping to protect everyone from the spread of infection.

If you have a kidney transplant you are given medication to suppress your immune system that will make any infection worse. It is therefore important to know about these infections before transplantation occurs so treatment can be given if required.

In the early years of dialysis treatment, there were outbreaks of hepatitis B, a serious infection which affects the liver. Since that time kidney patients (and staff) have been regularly checked to make sure they do not have this infection and there have been no serious outbreaks in kidney units in the United Kingdom.

There are other infections which can be caught by being exposed to infected blood or some other bodily fluids; these include hepatitis C and HIV, the virus which causes AIDS. Because of the experience with hepatitis B it is important to test dialysis patients regularly to make sure they do not carry hepatitis C and HIV. Treatment can be given for both of these infections if your doctors feel that they would be of benefit to you.

Strict confidentiality with respect to results will be maintained at all times. You are of course free to refuse testing if you so wish.

## How often are the blood tests taken?

If you are receiving haemodialysis treatment these blood tests will be taken every three months. They will also be taken if you are planning to have dialysis at another dialysis unit and may be taken more frequently if you have had haemodialysis abroad.

It is important that these blood tests are taken before you start on haemodialysis treatment. If dialysis treatment is being planned please ask the kidney doctor or nurse about the blood tests.

## Vaccination against hepatitis B infection

The Department of Health recommends that all individuals who may need haemodialysis treatment in the future should be vaccinated against hepatitis B infection.

To ensure you get the best protection from hepatitis B we offer vaccination to people before they start dialysis. If you start dialysis as an emergency you will need to have this course as soon as possible to ensure you are protected. Vaccination will encourage your body to produce antibodies to fight the infection. The vaccination programme consists generally of a course of three