

乙型肝炎帶菌者 如何照顧自己及家人

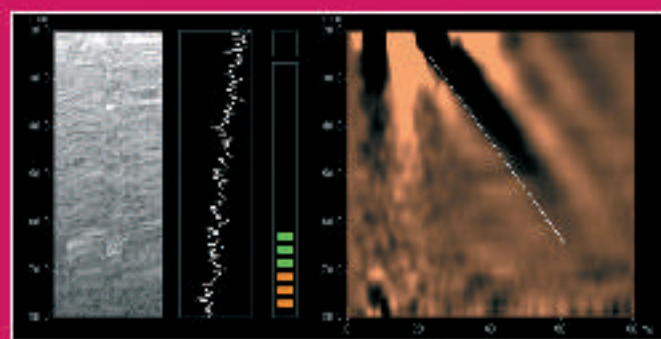
Living with hepatitis B

- ▲ 酒精對患有乙型肝炎的肝臟有害，應盡量避免。
- ▲ 避免購買市面上對肝臟有害的中/西成藥。
- ▲ 求診時，必須告訴醫生自己是乙型肝炎帶菌。
- ▲ 保持均衡飲食習慣。
- ▲ 未經完全煮熟的貝殼類或豬肝有可能受到甲或戊型肝炎病毒的污染，應盡量避免。
- ▲ 定期做運動。
- ▲ 如對甲型肝炎無免疫，建議接受預防針注射。
- ▲ 定期接受肝臟檢查。
- ▲ 提醒家人檢驗乙型肝炎或接受預防針注射。
- ▲ 避免無保護的性行為；切勿捐血；不要共用刀片、針筒、指甲鉗、牙刷或耳環；妥善處理所有傷口。
- ▲ Avoid alcohol as they are harmful to liver already infected with the hepatitis B virus.
- ▲ Avoid over the counter medication, or herbal remedies that may harm your liver.
- ▲ Inform your doctor that you are a hepatitis B carrier.
- ▲ Keep a healthy balanced diet.
- ▲ Avoid uncooked shellfish or pig liver as they may be contaminated with hepatitis A or E virus.
- ▲ Have regular exercise.
- ▲ Recommend Hepatitis A vaccination if blood test showed lack of immunity.
- ▲ Perform regular checkup to monitor progress of hepatitis B.
- ▲ Advise family members to have hepatitis B screening and get vaccinated when appropriate.
- ▲ Avoid unprotected sex; do not donate blood; do not share razors, needles, nail clippers, tooth brushes or earrings; cover all wounds properly.



利用嶄新的無創肝纖維化掃描器，可準確量度嚴重的肝纖維化或早期的肝硬化。

Fibroscan is a new non-invasive method of measuring liver fibrosis and it has high accuracy to diagnose advanced fibrosis or early cirrhosis.



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Free Union Hospital Shuttle Buses run between the Hospital and Tai Wai MTR Station.

專線小巴 Green Mini Bus: 68K (由沙田及大圍港鐵站開出)
(From Shatin and Tai Wai MTR Station)

公共巴士 Buses: 46P, 46X, 80, 80P, 85B, 87B, 89B, 249X, 281M, 286X, 287X (由九龍開出 From Kowloon)

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Union Integrated
Liver Centre
仁安綜合肝臟治療中心

乙型肝炎

定期檢查計劃



Hepatitis B Screening and Surveillance Programme

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慢性乙型肝炎

Chronic Hepatitis B

乙型肝炎(Hepatitis B) 是由過濾性病毒引起的疾病，患者身體內的病毒會在肝細胞內複製，激發身體免疫系統對抗病毒，損害肝臟功能。

香港有約8%的中國裔人士是乙型肝炎的帶菌者，當中大部份是受母體感染。大約 30% 的乙型肝炎患者會出現肝硬化、肝衰竭和肝癌。而乙型肝炎帶菌者患上肝癌的機會比非帶菌者高出100倍。

大部分慢性乙型肝炎患者早期沒有任何病徵，所以許多患者都不知道自己已受感染，通常要透過血液測試才會發現，甚至是肝臟功能開始衰退，才會感到不適。

當今已有可制止乙肝病毒複製、減低肝臟功能惡化機會的治療。另外，透過定期的肝臟檢查，可以知道乙肝病毒在身體內的活躍程度，並及早接受藥物治療，防止患者出現肝硬化和肝癌等併發症。

Hepatitis B is caused by a virus. The hepatitis virus will replicate inside the liver which stimulates the body's immune response resulting in liver damage.

Approximately 8% of Hong Kong Chinese are hepatitis B carriers. Most carriers acquired the virus early in life through maternal-fetal transmission. About 30% of hepatitis B carriers will develop liver cirrhosis, liver failure and liver cancer. The risk of liver cancer is 100-fold higher among hepatitis B carriers.

Most hepatitis B carriers have no symptom. They do not even know that they carry the virus until they have blood tests. Symptoms are only found in patients with advanced liver disease.

There are currently effective treatments that can suppress the hepatitis B virus and prevent disease progression. Moreover, by regular checkup, carriers with high risk of disease progression can be identified early to receive therapy.



乙型肝炎是病毒性肝炎的一種，可引起急性肝炎，更可導致慢性肝病包括肝硬化和肝癌。

Hepatitis B is a type of viral hepatitis that leads to both acute and chronic hepatitis. It can lead to chronic liver damage, including cirrhosis and liver cancer.

乙型肝炎的治療

Treatment of hepatitis B

慢性乙型肝炎治療的主要目的是抑制病毒複製，減低出現肝硬化或肝癌的機會。治療藥物分兩大類，分別是免疫調節劑和抗病毒藥物。

免疫調節劑包括傳統干擾素及新一代干擾素（聚乙二醇干擾素 α 2a），這類藥物能直接阻止病毒複製，並透過刺激人體的免疫系統來清除病毒的注射藥物，治療為期一年。

口服抗病毒藥物如拉米夫定 (lamivudine)、阿德福韋 (adefovir dipivoxil)、替比夫定 (telbivudine) 及恩替卡韋 (entecavir)、泰諾福韋 (tenofovir disoproxil fumarate)，作用是抑制乙肝病毒複製，從而令肝功能回復正常。然而，病人必須每天持續服藥方能得到療效。

The goal of hepatitis B treatment is to suppress the virus and hence reduce the risk of liver cirrhosis and cancer. Treatment consists of two modalities that includes interferon or oral anti-virals.

Interferon acts by stimulating the body immune system to clear the virus. The drug has to be given by subcutaneous injection weekly for about 1 year.

There are several antiviral agents currently available including lamivudine, adefovir, telbivudine, entecavir and tenofovir. These drugs can effectively suppress the virus and thus to maintain normal liver function. These drugs are given by oral route daily on a long-term basis.

乙型肝炎帶菌者的檢查計劃

Hepatitis B carrier Screening and Surveillance Programme

計劃名稱 Name of Package	肝臟專科醫生診症 Specialist's Consultation	化驗項目 Pathology	肝臟超聲波 US Liver	肝纖維化掃描 Fibroscan
首次檢查 Comprehensive 1st visit	✓	肝功能LFT 甲胎蛋白AFP 乙肝e抗原HBeAg 乙肝病毒數量HBV-DNA	✓	✓
跟進檢查 Follow up visit	✓	肝酵素ALT 甲胎蛋白AFP	✓	選擇性 Optional
肝纖維化掃描 Fibroscan + 乙肝病毒數量檢查 DNA	✓	乙肝病毒數量HBV-DNA	--	✓
肝纖維化掃描 Fibroscan + 超聲波檢查 USG	✓	--	✓	✓
肝纖維化掃描 Fibroscan	✓	--	--	✓
肝纖維化掃描(選擇性) Optional Fibroscan	--	--	--	✓

乙型肝炎相關的檢查

Investigations of hepatitis B status

血液檢驗：

▲ 乙型肝炎表面S抗原(HBsAg) --- 可確定是否乙型肝炎帶菌

▲ 乙型肝炎核抗原e抗原 (HBeAg) --- 顯示乙型肝炎病毒在身體內的活躍程度

▲ 肝酵素 (e.g. ALT) --- 可確定肝臟是否發炎

▲ 乙型肝炎病毒數量 (HBV-DNA) --- 可知血液中有多少病毒。病毒數量愈多、活躍程度愈高，患有肝腫瘤的機會則愈大。

▲ 甲胎蛋白 (AFP) --- 度數愈高，有肝腫瘤的機會愈大。

肝臟超聲波造影或電腦掃描檢查：檢查肝臟是否有腫瘤及肝硬化。

肝纖維化掃描器：可量度肝臟纖維化的程度。

Blood tests：

▲ HBsAg – a marker of hepatitis B carrier state

▲ HbeAg – a marker of infectivity and used to determine treatment response

▲ Liver function test (eg ALT) – indicates whether there is inflammation in the liver

▲ HBV-DNA – measures the amount of virus in blood. High levels are associated with high viral replication and the risk of development of hepatocellular carcinoma

▲ Alpha Fetoprotein (AFP) – a liver cancer marker.

Liver Ultrasonography or CT：to see if there are any abnormalities in the liver.

Fibroscan：to quantify the degree of liver fibrosis