Results A total of 126 patients tested positive for HIV in KAMC-Riyadh during the study period. 53 of these patients were screened for hepatitis B, of whom four were positive; 55 were screened for hepatitis C, of whom four were also positive, and 72 patients were screened for tuberculosis, of whom seven were positive. The remainder of the patients were never screened for any of the diseases.

Conclusion More than 40% of patients with HIV were not screened for either hepatitis B, hepatitis C, or tuberculosis, which are the most common co-infections with HIV. These diseases may progress quickly and could be managed if discovered early or prevented. These results demonstrate the need for a comprehensive HIV program that involves early screening and protection against all infectious diseases.

Background Hepatitis B continues to affect many people in Saudi Arabia, causing a huge burden on the healthcare system for treating patients and preventing spread of the disease. Because hepatitis B is not curable, transmission of infection can only be prevented by vaccinating those susceptible, paying special attention to children of positive mothers. Guidelines suggest that all infants born to positive mothers should receive both the hepatitis B vaccine and immune globulin within 12 hours of birth. In addition to the remaining two doses of the hepatitis vaccine, infants should also be tested for hepatitis B 3 to 6 months following the last dose of vaccine. The aim of this study was to identify if international guidelines were followed after delivery in hepatitis B-positive mothers at KAMC-Riyadh.

Methods This was a retrospective analysis of pregnant mother’s positive to hepatitis B who gave birth in KAMC-Riyadh during 2016–2017. Data regarding administration of vaccine and immune globulin, completion of vaccine series, and follow-up testing were extracted from the child’s medical record.

Results During the 2-year study period, a total of 105 hepatitis B-positive mothers gave birth, and all infants were administered the birth dose of the hepatitis B vaccine; however, only 55 children were documented to have completed the three-dose series of the vaccine. Only 101 infants were administered immune globulin after birth, and only two children were tested for the virus.

Conclusion Infants born to hepatitis B-positive mothers do not receive special attention or follow-up. It is not known why four infants did not receive immune globulin; however, unclear documentation of the virus in the mother’s file during pregnancy or delivery may be a reason. Many of these children did not receive their full vaccine series and almost all were not tested for the virus. These numbers demonstrate the need for a strategic plan for the management and follow-up of infants born to hepatitis B-positive mothers.