

Hepatitis B Virus Core IgM Antibody, Serum

## Overview

#### **Useful For**

Diagnosis of acute hepatitis B virus (HBV) infection

Identifying acute HBV infection in the serologic window period when hepatitis B virus surface antigen and hepatitis B virus surface antibody results are negative

Differentiation between acute, chronic, or past HBV infections in the presence of positive hepatitis B virus core total antibodies

## **Testing Algorithm**

For more information see Hepatitis B: Testing Algorithm for Screening, Diagnosis, and Management.

# **Special Instructions**

- Viral Hepatitis Serologic Profiles
- Hepatitis B: Testing Algorithm for Screening, Diagnosis, and Management

#### **Method Name**

Electrochemiluminescence Immunoassay (ECLIA)

## **NY State Available**

No

## **Specimen**

## **Specimen Type**

Serum SST

## **Necessary Information**

Date of collection is required.

#### Specimen Required

Patient Preparation: For 24 hours before specimen collection, patient should not take multivitamins or dietary

supplements (eg, hair, skin, and nail supplements) containing biotin (vitamin B7).

Supplies: Sarstedt Aliquot Tube, 5 mL (T914)

**Collection Container/Tube:** Serum gel (red-top tubes are **not acceptable**)

Submission Container/Tube: Plastic vial

**Specimen Volume:** 0.6 mL **Collection Instructions:** 

1. Centrifuge blood collection tube per manufacturer's instructions (eg, centrifuge and aliquot within 2 hours of



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collection for BD Vacutainer tubes).

2. Aliquot serum into a plastic tube.

#### **Forms**

If not ordering electronically, complete, print, and send 1 of the following:

- -Gastroenterology and Hepatology Test Request (T728)
- -Infectious Disease Serology Test Request (T916)

## Specimen Minimum Volume

0.6 mL

## **Reject Due To**

Gross	Reject
hemolysis	
Gross lipemia	Reject
Gross icterus	Reject

## **Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Serum SST	Frozen (preferred)	90 days	
	Refrigerated	6 days	

## **Clinical & Interpretive**

#### **Clinical Information**

Hepatitis B virus (HBV) is a DNA virus that is endemic throughout the world. In the initial (acute) phase of infection, hepatitis B virus core antibodies (anti-HBc) consist almost entirely of the IgM antibody class and appear shortly after the onset of symptoms. Anti-HBc IgM can be detected in serum and is usually present for up to 6 months after acute HBV infection. Anti-HBc IgM may be the only serologic marker of a recent hepatitis B infection detectable following the disappearance of hepatitis B surface antigen and prior to the appearance of hepatitis B virus surface antibody (ie, serologic window period).

#### **Reference Values**

Negative

See <u>Viral Hepatitis Serologic Profiles</u>

## Interpretation

A positive result indicates recent acute hepatitis B infection.

A negative result suggests lack of recent exposure to the virus in preceding 6 months.

## **Cautions**



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The predictive value of a positive hepatitis B virus core (HBc) IgM antibody test result is low when used to test specimens from patients with low prevalence of acute hepatitis B virus infection.

Serum specimens from individuals taking biotin supplements of 20 mg or more per day may have false-negative anti-HBc IgM test results due to interference of biotin with the assay. Such individuals should stop taking these biotin-containing dietary supplements for a minimum of 12 hours before blood collection for this test.

Performance characteristics have not been established for the following specimen characteristics:

- -Patients younger than 21 years, pregnant women, or in populations of immunocompromised or immunosuppressed patients
- -Grossly icteric (total bilirubin level of >25 mg/dL)
- -Grossly lipemic (Intralipid level of >1000 mg/dL)
- -Grossly hemolyzed (hemoglobin level of >2000 mg/dL)
- -Containing particulate matter
- -Cadaveric specimens

#### Clinical Reference

- 1. LeFebre ML, U.S. Preventive Services Task Force. Screening for hepatitis B virus infection in nonpregnant adolescents and adults: U.S. Preventive Services Task Force recommendation statement. Ann Intern Med. 2014;161(1):58-66. doi:10.7326/M14-1018
- 2. Jackson K, Locarnini S, Gish R. Diagnostics of hepatitis B virus: Standard of care and investigational. Clin Liver Dis. 2018 22;12(1):5-11. doi:10.1002/cld.729
- 3. Coffin CS, Zhou K, Terrault NA. New and old biomarkers for diagnosis and management of chronic hepatitis B virus infection. Gastroenterology. 2019;156(2):355-368. doi:10.1053/j.gastro.2018.11.037
- 4. WHO guidelines on hepatitis B and C testing. World Health Organization; 2017. Accessed December 21, 2023. Available at www.who.int/hepatitis/publications/HEP17001\_WEB11.pdf?ua=1
- 5. Division of Viral Hepatitis, National Center for HIV, Viral Hepatitis, STD, and TB Prevention: Testing and public health management of persons with chronic hepatitis B virus infection. Centers for Disease Control and Prevention. Updated March 28, 2022. Accessed December 21, 2023. Available at www.cdc.gov/hepatitis/hbv/testingchronic.htm
- 6. Conners EE, Panagiotakopoulos L, Hofmeister MG, et al. Screening and testing for hepatitis B virus infection: CDC recommendations United States, 2023. MMWR Recomm Rep. 2023;72(1):1-25. doi:10.15585/mmwr.rr7201a1

#### **Performance**

#### **Method Description**

The Elecsys Anti-HBc (hepatitis B virus core antibody) IgM assay is performed with an electrochemiluminescence immunoassay on the automated cobas e 801 immunochemistry analyzer. Anti-HBc IgM present in patient's sample is pretreated with anti-Fdy reagent to block specific IgG. After addition of biotinylated monoclonal human IgM-specific antibodies, the complexes formed from reaction of ruthenium-labeled HBc antigen, streptavidin-coated microparticles, anti-HBc IgM present in the sample, and the biotinylated anti-human IgM become bound to the solid phase via interaction of biotin and streptavidin. The reaction mixture is then aspirated into the measuring cell where the microparticles are magnetically captured onto the surface of the electrode, and unbound substances are washed away. Voltage is applied to the electrode that induces chemiluminescent emissions, that are measured by a photomultiplier. The test result is determined by comparing the electrochemiluminescence signal generated from the sample to the cutoff index value set from reagent lot-specific assay calibration. (Package insert: Elecsys Anti-HBc IgM. Roche Diagnostics; v1.0,



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## **PDF Report**

No

# Day(s) Performed

Monday through Friday, Sunday

## **Report Available**

Same day/1 to 2 days

# **Specimen Retention Time**

14 days

## **Performing Laboratory Location**

Jacksonville

## Fees & Codes

#### **Fees**

- Authorized users can sign in to <u>Test Prices</u> for detailed fee information.
- Clients without access to Test Prices can contact <u>Customer Service</u> 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact <u>Customer Service</u>.

## **Test Classification**

This test has been cleared, approved, or is exempt by the US Food and Drug Administration and is used per manufacturer's instructions. Performance characteristics were verified by Mayo Clinic in a manner consistent with CLIA requirements.

## **CPT Code Information**

86705

## **LOINC®** Information

Test ID	Test Order Name	Order LOINC® Value
НВІМ	HBc IgM Ab, S	24113-3

Result ID	Test Result Name	Result LOINC® Value
НВІМ	HBc IgM Ab, S	24113-3