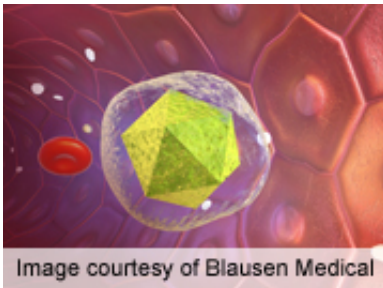


Hep B screening urged before TNF-alpha inhibitor therapy

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All patients with psoriasis should be screened for hepatitis B surface antigen and hepatitis B core antibody prior to the initiation of tumor necrosis factor-alpha inhibitor therapy, according to research published online June 25 in the *Journal of the American Academy of Dermatology*.

(HealthDay) -- All patients with psoriasis should be screened for hepatitis B surface antigen and hepatitis B core antibody prior to the initiation of tumor necrosis factor-alpha inhibitor therapy, according to research published online June 25 in the *Journal of the American Academy of Dermatology*.

Amanda Abramson, M.D., from the Baylor University Medical Center in Dallas, and colleagues reviewed the literature for studies to provide guidance for dermatologists on the use of tumor necrosis factor-alpha inhibitory agents (etanercept, adalimumab, and infliximab) for patients with psoriasis who have hepatitis B.

The researchers found that, in patients with psoriasis who are hepatitis B surface antigen-positive, treatment with tumor necrosis factor-alpha inhibitors may result in reactivated hepatitis B. Patients with an isolated positive hepatitis B core antibody may also experience reactivation, although this occurred less frequently. Compared with the other two agents, infliximab was associated with more cases of reactivation and there were fatalities reported with this agent. Evidence suggested that early or pre-emptive antiviral therapy can greatly minimized or eliminate the risk of reactivation.

"Hepatitis B screening is essential prior to the initiation of tumor necrosis factor-alpha inhibitor therapy," the authors write. "Psoriatic patients found to be hepatitis B surface antigen or [hepatitis B](#) core antibody-positive should be referred to an appropriate specialist for evaluation and therapy. This would allow for the safe use of tumor necrosis factor-alpha inhibitors in psoriatic patients despite recently published guidelines to the contrary."

Several authors disclosed [financial ties](#) to the pharmaceutical industry.

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