

UCMC - Liver Transplant and Hepatitis B (HBV) Guidelines

TABLE Key: (+) = positive value, (-) negative value, (----) no standard recommendation necessary

Recipient		Donor		HBIG <i>(administer during anhepatic phase)</i>	Entecavir <i>Initiate POD#0 (continue indefinitely)</i>	Monitoring Post-Transplant		
HBsAg	HBsAb	HBV DNA	HBcAb			HBsAb	HBV DNA	HBsAg
-	+/-	-	+	NO	0.5 mg po daily ²⁻⁵	3 & 12 months then every 6 months	----	
-	+	+	+/-	NO	0.5 mg po daily ²⁻⁵			
-	-	+	+/-	YES 10,000 units IV x 1 dose	0.5 mg po daily ²⁻⁵			
+	-	+/-	+/-	YES 10,000 units IV x 1 dose	0.5 mg po daily ²⁻⁵	----	3 & 12 months then every 6 months	
+	-	+/-	+/-	Physician discretion 10,000 units IV x 1 dose	0.5 mg po daily ¹⁻⁵	----	3 & 12 months then every 6 months	12 months, then annually
+	-	+/-	+/-	NO	0.5 mg po daily ¹⁻⁵	----	3 and 12 months then every 6 months	12 months, then annually

¹ If patient already on tenofovir disoproxil or alafenamide PRIOR to txp, resume same therapy post-txp (if appropriate for renal function)

² Entecavir dose should be increased to 1 mg daily in patients refractory to nucleoside therapy or with decompensated liver disease (physician discretion)

³ Entecavir tablets are a Level 2 hazardous drug and can't be crushed; If unable to take PO meds order entecavir oral solution.

⁴ If Entecavir therapy is delayed (ie. NPO) and not initiated by POD#1:

(a) Administer single dose of HBIG 10,000 units IV (if already received HBIG dose during anhepatic phase then monitor HBsAb to determine when next dose is due (see 4b below)

(b) Until entecavir is initiated monitor HBsAb titers every 7 days. IF HBsAb < 500 mIU/mL redose HBIG (5,000 units IV)

⁵Renal Dose Adjustments

CrCl (mL/min)	Entecavir (0.5 mg dose)	Entecavir (1.0mg dose)	Tenofovir Disoproxil (non-form)
>50	0.5 mg daily	1 mg daily	300 mg daily
30-50	0.5 mg every 48 hrs	1 mg every 48 hrs	300 mg every 48 hrs
10 to 30	0.5 mg every 72 hrs	1 mg every 72 hrs	300 mg every 72-96 hrs
<10 or PD	0.5 mg every 7 days	1 mg every 7 days	300 mg every 7 days
HD	0.5 mg every 7 days after HD	1.0 mg every 7 days after HD	300 mg every 7 days after HD
CVVH	0.5 mg every 48 hrs	1 mg every 48 hrs	300 mg every 96 hrs

CrCl (mL/min)	Tenofovir Alafenamide
>15	25 mg daily
<15 or PD	Use not recommended
HD	25 mg daily; after HD on HD days
CVVH	No data