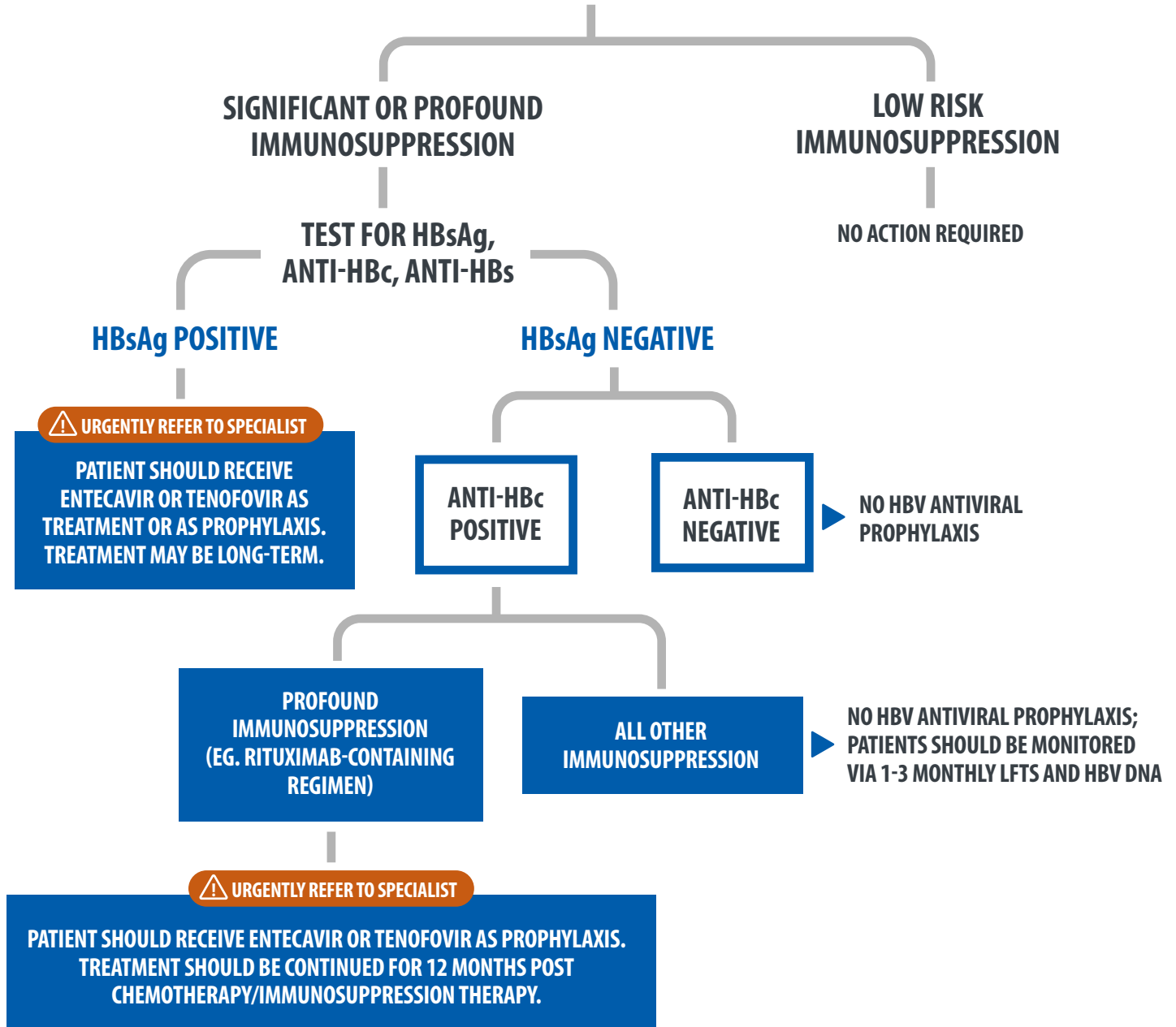


MANAGEMENT OPTIONS FOR HBV PATIENTS RECEIVING CHEMOTHERAPY / IMMUNOSUPPRESSION THERAPY

THIS DECISION TREE SHOWS THE VARIOUS TREATMENT OPTIONS FOR PATIENTS WHO ARE RECEIVING CHEMOTHERAPY OR IMMUNOSUPPRESSION THERAPY, BASED ON THEIR HBsAg STATUS.

NOTE: TREATMENT WILL BE PRESCRIBED IN SPECIALIST SETTINGS, AS ANTIVIRAL THERAPY FOR PROPHYLAXIS DURING IMMUNOSUPPRESSION IS NOT CURRENTLY A PBS LISTED INDICATION.

PATIENT TO RECEIVE CHEMOTHERAPY OR IMMUNOSUPPRESSION THERAPY



PROFOUND IMMUNOSUPPRESSION	SIGNIFICANT IMMUNOSUPPRESSION	LOW RISK IMMUNOSUPPRESSION
<ul style="list-style-type: none"> • HAEMATOPOIETIC STEM CELL TRANSPLANTATION • B-CELL DEPLETING AGENTS (EG. RITUXIMAB) • ACUTE LEUKAEMIA AND HIGH-GRADE LYMPHOMA THERAPY 	<ul style="list-style-type: none"> • ORAL CORTICOSTEROIDS \geq 20MG PER DAY FOR AT LEAST 2 WEEKS • ANTI-TNF THERAPY, AND ANTI-REJECTION THERAPY FOLLOWING TRANSPLANT 	METHOTREXATE, AZATHIOPRINE AND ORAL CORTICOSTEROIDS $<$ 2 WEEKS $<$ 20 MG