# Week 12 Team C Worksheet

Hepatitis B and Cirrhosis

You are caring for J.B., age 35, who has had chronic hepatitis B for nine years. The origin of his acute infection was never ascertained. He is not married, lives alone, and sometimes has trouble managing his disease.

1. Describe the pathophysiology of acute hepatitis B infection. How is this different from chronic hepatitis B infection?
2. If J.B. had known about his exposure at the time, could any treatment measures have been undertaken at the time?
3. Describe two signs of the preicteric stage and three signs of the icteric stage of acute hepatitis B infection. In which of the stages could J.B. transmit the virus? Be sure to include discussion of the mode of transmission.
4. What serum markers remain high when chronic hepatitis B is present?
5. Explain how cirrhosis develops from chronic hepatitis B. Why is the early stage of cirrhosis relatively asymptomatic?

J.B.'s cirrhosis is now well advanced. He has developed ascites, edema in the legs and feet, and esophageal varices. His appetite is poor, he is fatigued, and he has frequent respiratory and skin infections. Jaundice is noticeable. He has been admitted with hematemesis and shock resulting from ruptured esophageal varices.

1. Explain why each of the following events occur: (1) excessive bleeding from trauma, (2) increased serum ammonia levels, and (3) hand-flapping tremors and confusion.