

Screening for Hepatitis B Before Chemotherapy Is Cost Effective

People who receive chemotherapy for cancer have a higher risk of hep B reactivation.

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Compared with not screening at all or screening only those at the highest risk for the virus, universal screening for hepatitis B virus (HBV) before individuals receive chemotherapy for solid tumors is the most cost-effective option, Healio reports.

Chemotherapy for solid tumors can suppress the immune system and raise the risk of reactivation of HBV.

Gauree G. Konijeti, MD, of the Scripps Clinic in San Diego, and colleagues conducted modeling of a theoretical population of U.S. adults who started chemotherapy for a solid tumor. Publishing their findings in *Clinical Gastroenterology and Hepatology*, they compared three screening strategies, including a screen-all strategy, screening only the high-risk patients or screening none.

Cost-effectiveness analyses such as these look to a metric of what is known as a quality-adjusted life-year (QALY), which is a composite of years of life gained and improvement in the quality of health.

If the threshold for cost effectiveness were \$50,000 per QALY gained as a result of the testing intervention, the study authors found that the screen-all option was the most cost effective of the three strategies. The additional cost per QALY gained by screening all compared with screening only high-risk patients was \$41,078.

Screening no one was less effective and less costly compared with the other two screening strategies.

“Guidelines should consider recommending HBV tests for patients initiating chemotherapy,” the study authors concluded.

To read the Healio article, [click here](#).

To read the study abstract, [click here](#).

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