A diagnosis of chronic liver disease from viral hepatitis in a child can be devastating to a parent. After the initial shock, parents have a multitude of questions.

Is the diagnosis correct? How can they be sure? Now what can they do? Does the child really need a liver biopsy? Will it hurt? What treatments are available? What are their success rates? What experimental therapy is available?

Whom should they talk to about their child’s viral hepatitis? Should they tell the school? What can the family do to protect themselves, their relatives and their friends?

Unfortunately, there is very little information available in one reference to aid families dealing with this diagnosis. Thus, the need and the impetus for this report.

Much progress has been made in the fight to combat and treat chronic viral hepatitis. Safe and effective vaccines can protect individuals who are susceptible to these devastating diseases. New and continually improving therapies offer hope to adults and children already afflicted with these ailments.

The safety and efficacy of new drugs for hepatitis are initially tested in adults. Only when found to be safe and effective do trials begin in children. Emphasis must be placed on the design and implementation of studies to test new drugs that have the potential to eradicate and cure individuals with chronic hepatitis and liver disease.

But much more needs to be done. Only through research can improved therapies be made available for those with these diseases. This costs money. Spreading the word about hepatitis and raising public awareness of the costs of these diseases to individuals and society are important in garnering needed research dollars to combat these illnesses.

This report provides an important step in providing trustworthy and authoritative information about chronic viral hepatitis in children. It is written so it can be easily understood. Of course, no single report can individualize therapy for any patient.
Discussions between the child, parents and health professionals are needed to determine the best therapy for the individual child. However, this report can aid the discussion so the various options available to the child can be discussed.

PKIDs should be congratulated on tackling this difficult but important task. I hope you obtain valuable and important information by referring to this report.

Philip Rosenthal, M.D.
Professor of Pediatrics & Surgery
Medical Director, Pediatric Liver Transplant Program
Director, Pediatric Hepatology
University of California, San Francisco
PKIDs Scientific Advisory Board Member