# Article information:

Circulating immune complexes and mutations of HBsAg are associated with the undetectable HBsAg in anti-HBs and HBeAg positive occult hepatitis B virus infection - PubMed
<https://pubmed.ncbi.nlm.nih.gov/36523838/>

# Article summary:

1. Circulating immune complexes and mutations of HBsAg are associated with the undetectable HBsAg in anti-HBs and HBeAg positive occult hepatitis B virus infection.

2. 2022 plasma samples from blood donors were collected from 16 provinces in China from 2015 to 2018, and 404 of them were positive using Lumipulse HBsAg-HQ assay.

3. 10 HBsAg-/anti-HBs+/HBeAg+ OBI blood donor samples were further dissociated and HBsAg-CICs were detected in 7 samples, while immune escape mutations such as P127T, F134L, G145R, V168A, andI126T/S in the S region were found.

# Article rating:

May be slightly imbalanced: The article presents the information in a generally reliable way, but there are minor points of consideration that could be explored further or claims that are not fully backed by appropriate evidence. Some perspectives may also be omitted, and you are encouraged to use the research topics section to explore the topic further.

# Article analysis:

The article is generally reliable and trustworthy as it provides a detailed description of the study conducted by Ying Yan et al., which was conducted over a period of three years (2015 to 2018). The authors have provided sufficient evidence to support their claims that circulating immune complexes and mutations of HBsAg are associated with the undetectable HBsAg in anti-HBs and HBeAg positive occult hepatitis B virus infection. Furthermore, they have also provided evidence for their findings through sequencing analysis which showed that D44N, N98T, G73S, Del 56-116, andI161T occurred in the pre-S region while immune escape mutations such as P127T, F134L, G145R, V168A, andI126T/S in the S region were found.

However there are some potential biases that should be noted when considering this article. Firstly, the sample size used for this study was relatively small (2022 plasma samples) which may not be representative of the general population or provide enough evidence to draw definitive conclusions about the association between circulating immune complexes and mutations of HBsAg with undetectable HBsAg in anti-HBs and HBeAg positive occult hepatitis B virus infection. Secondly, there is no mention of any potential risks associated with this study or any counterarguments that could be made against its findings. Lastly, there is no mention of any promotional content or partiality within the article which could potentially influence its credibility.

In conclusion, although this article is generally reliable and trustworthy due to its detailed description of the study conducted by Ying Yan et al., there are some potential biases that should be noted when considering its findings such as its small sample size which may not be representative of the general population or provide enough evidence to draw definitive conclusions about its findings; lack of mention of any potential risks associated with this study; lack of counterarguments; lack of mention of any promotional content or partiality within the article; etc.

# Topics for further research:

* Occult hepatitis B virus infection
* Immune escape mutations
* Pre-S region mutations
* S region mutations
* Circulating immune complexes
* HBsAg mutations

# Report location:

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