Virus specific IgM class antibody has been detected in most acute infections and is a reliable marker for acute diseases. The illness of patients who are infected with hepatitis B Virus (HBV) takes many different courses including subclinical illness with uneventful recovery, acute flumiant disease, and chronic forms which begin with either subclinicals or acute features.

For this reason it is often difficult to differentiate acute or recent infection from remote or chronic infection and to distinguish acute hepatitis B from non A - non B hepatitis (NANB) in a chronic carrier, despite the availability of liver function and serological tests.

We have developed a simplified 3 step-sandwich RIA for IgM to hepatitis B core antigen (HBcAg) using two kinds of monoclonal antibodies, one of them was antibody to human IgM and another was antibody to HBcAg.

Within-assay and between-assay CV's on three control serum panels were 5.2 - 13.1 % and 4.4 - 7.0 %, respectively. These results indicate that the sandwich method with monoclonal antibodies can be useful for routine clinical applications.