

# **Epidemiology of hepatitis B & C in Albania**

# Surveillance system of Viral Hepatitis B & C in Albania

## Based on:

### 1) **Disease specific surveillance** , comprising:

Major Disease-Based surveillance System (SMBS-14 SH)

- monthly mandatory reported aggregated data.

Since 2010 starting the reporting for four types of viral hepatitis .

In 2013 it was established a new case report form for HBV and HCV, which includes the risk exposure for these two diseases (individual data)

### 2) **Syndromic surveillance System-ALERT-**

weekly mandatory reporting system of infectious syndrome “jaundice”

### 3) **Surveys**, comprising:

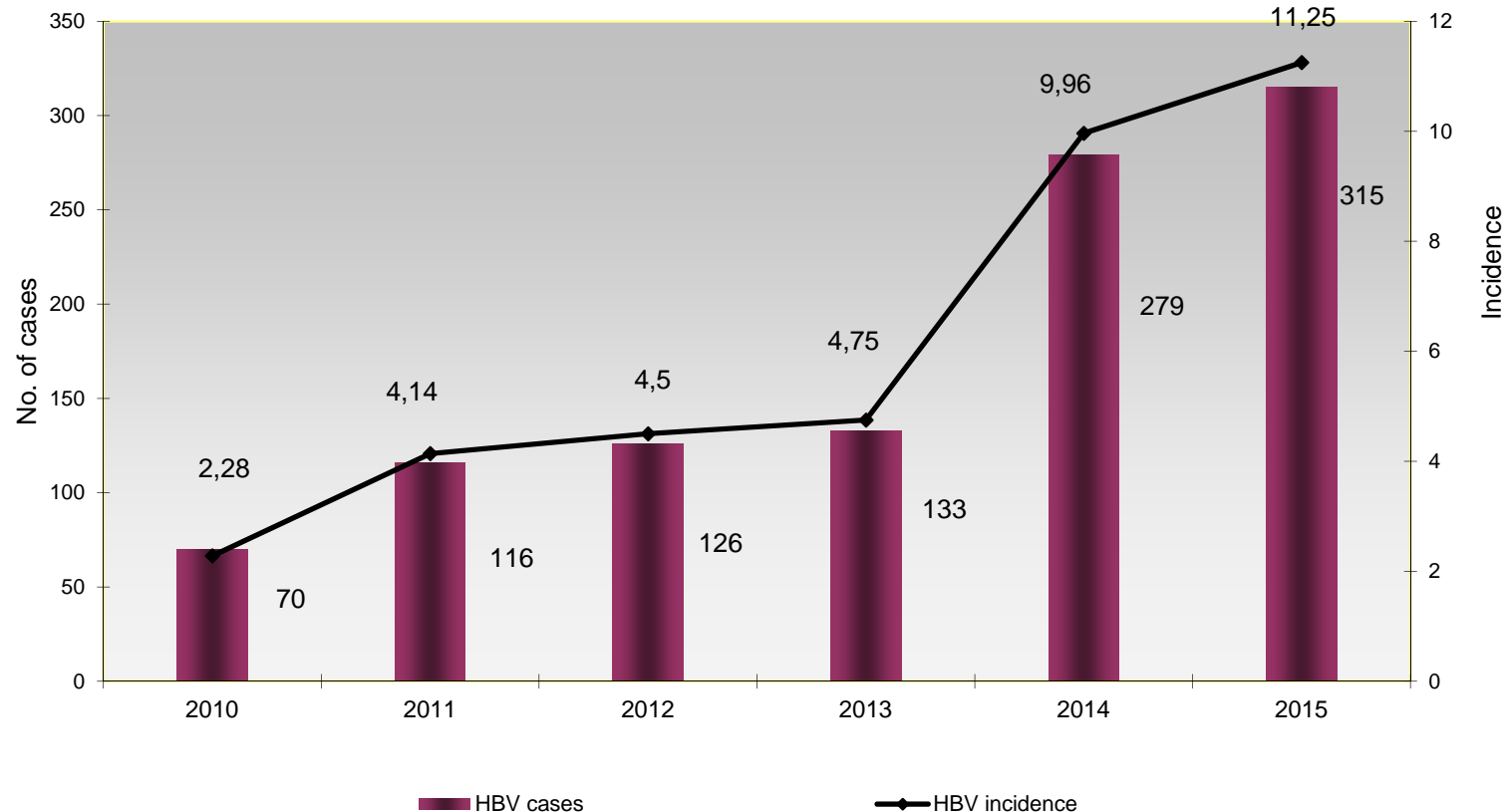
Bio-BSS-biologic behaviour surveillance study (2005,2008.2011)

Biological surveillance of infectious agents among receiving multiple transfusions(2006-2011)

Sero-prevalence studies in general population and in risk groups.

# Incidence of HBV ,2010-2015

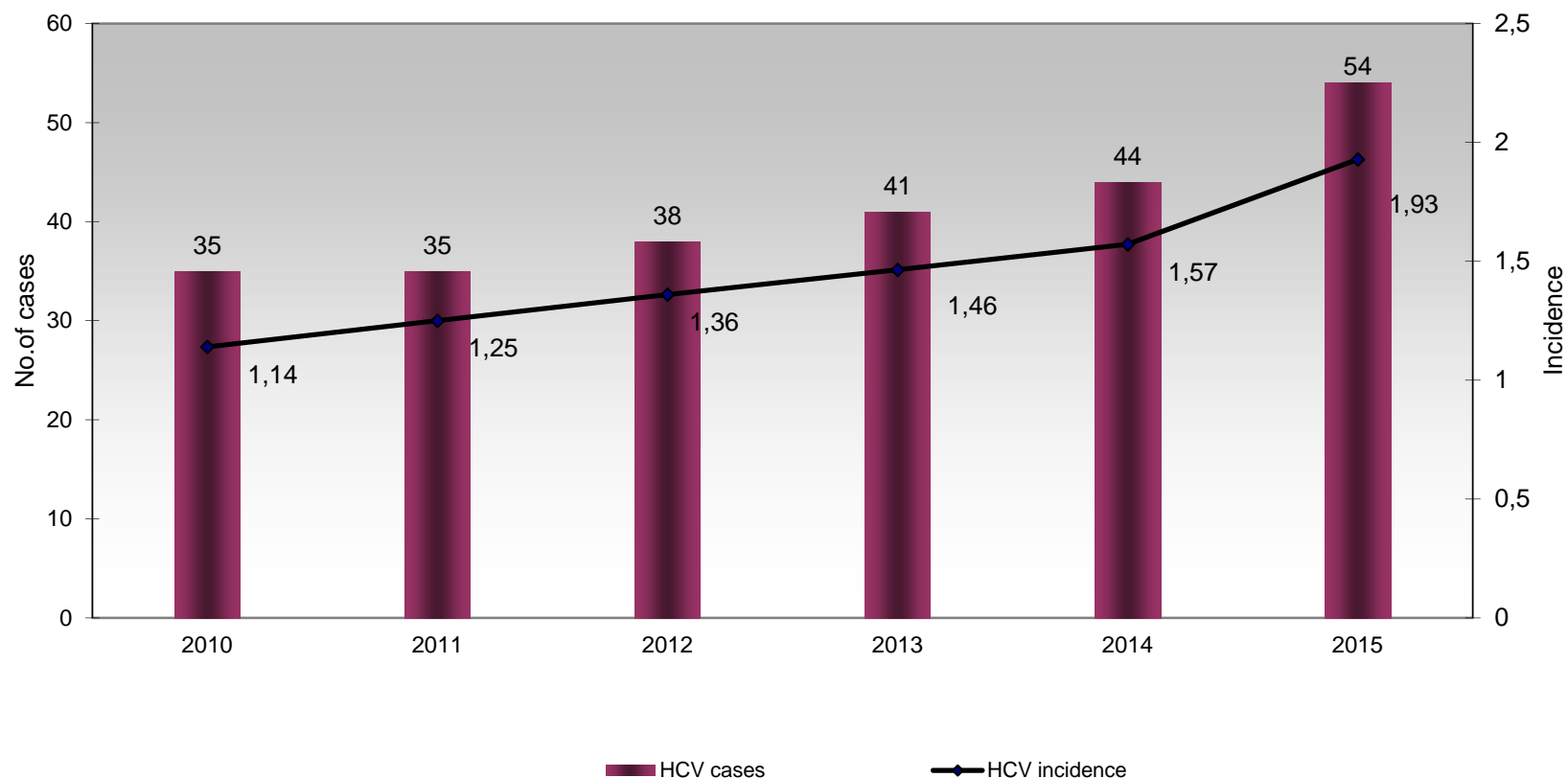
(no. of cases/100 000 population)



- The incidence of HBV is increased during the years.
- Strengthening of the surveillance system ( a new case report form established.)
- 2010-2012- data from MSBD (hospitals)
- 2013-2015- data from case individual report form ( hospitals, private and public labs)

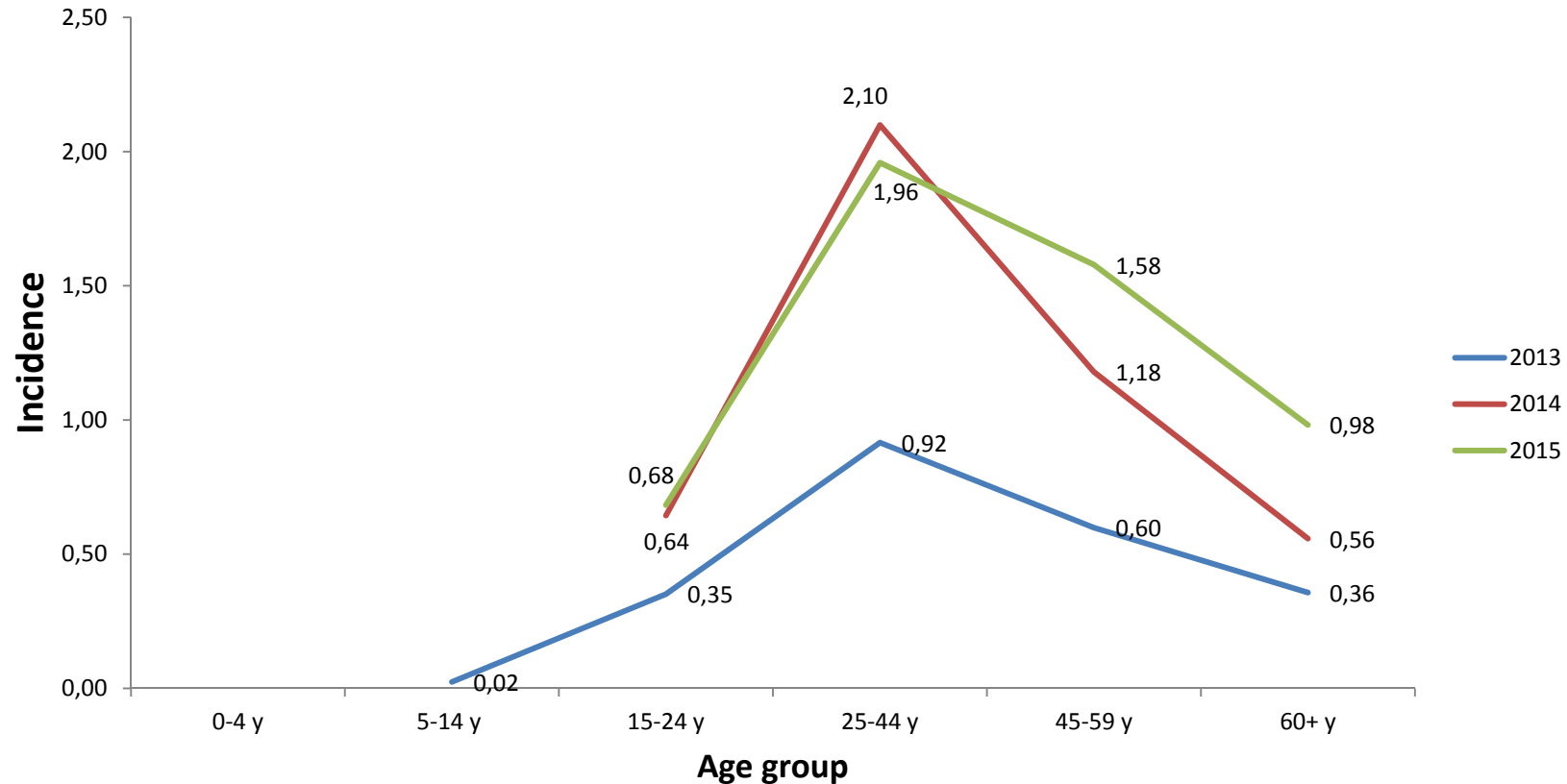
# Incidence of HCV, 2010-2015

(no. of cases/100 000 population)



- Increase of incidence during 2010-2015.
- 2010-2012- data from MSBD (hospitals)
- 2013-2015- data from case individual report form ( hospitals, private and public labs)

# Incidence of HBV by age group (no of cases/10000) 2013-2015



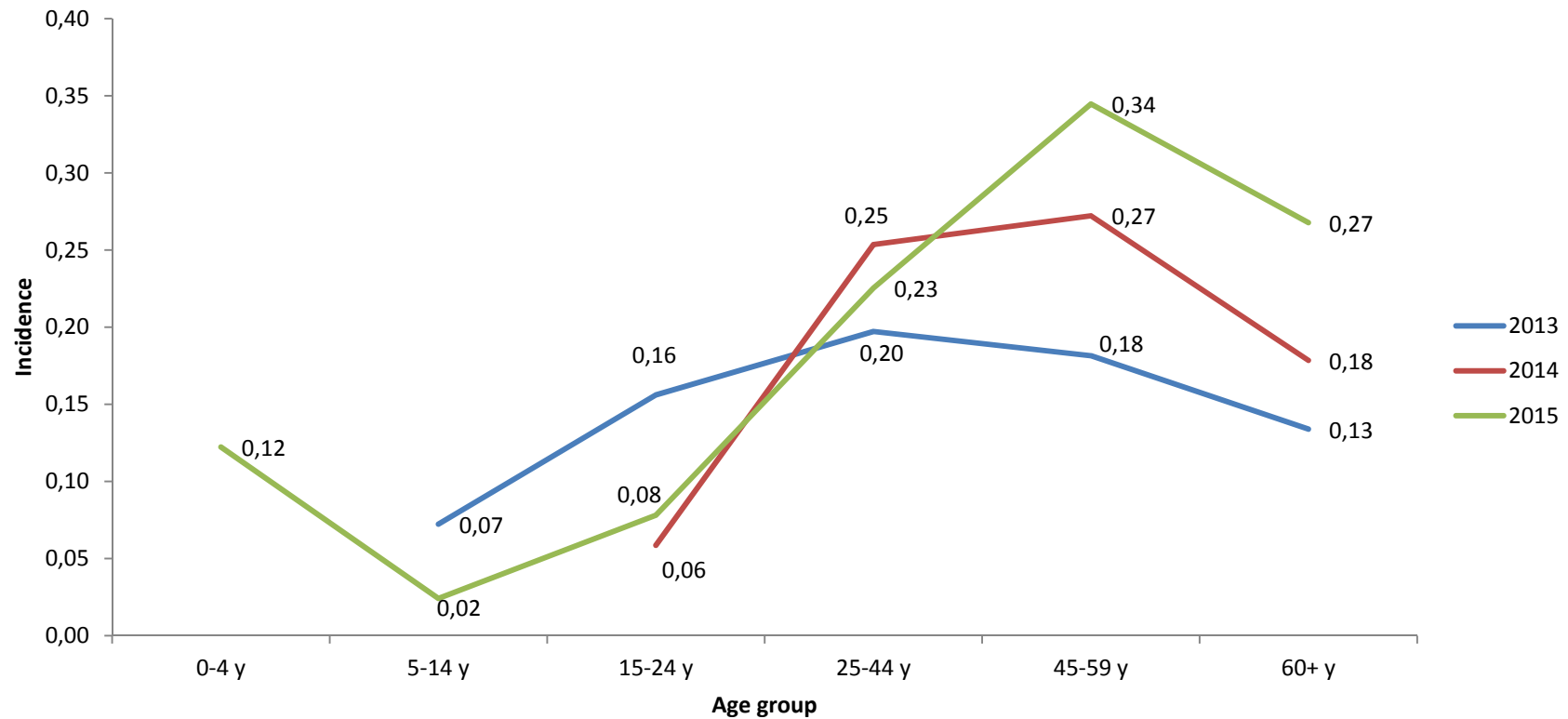
25-44 years old –higher incidence in three years

No cases in pediatric age group in 2014,2015

Only one case in age group of 5-14 years in 2013, very low incidence

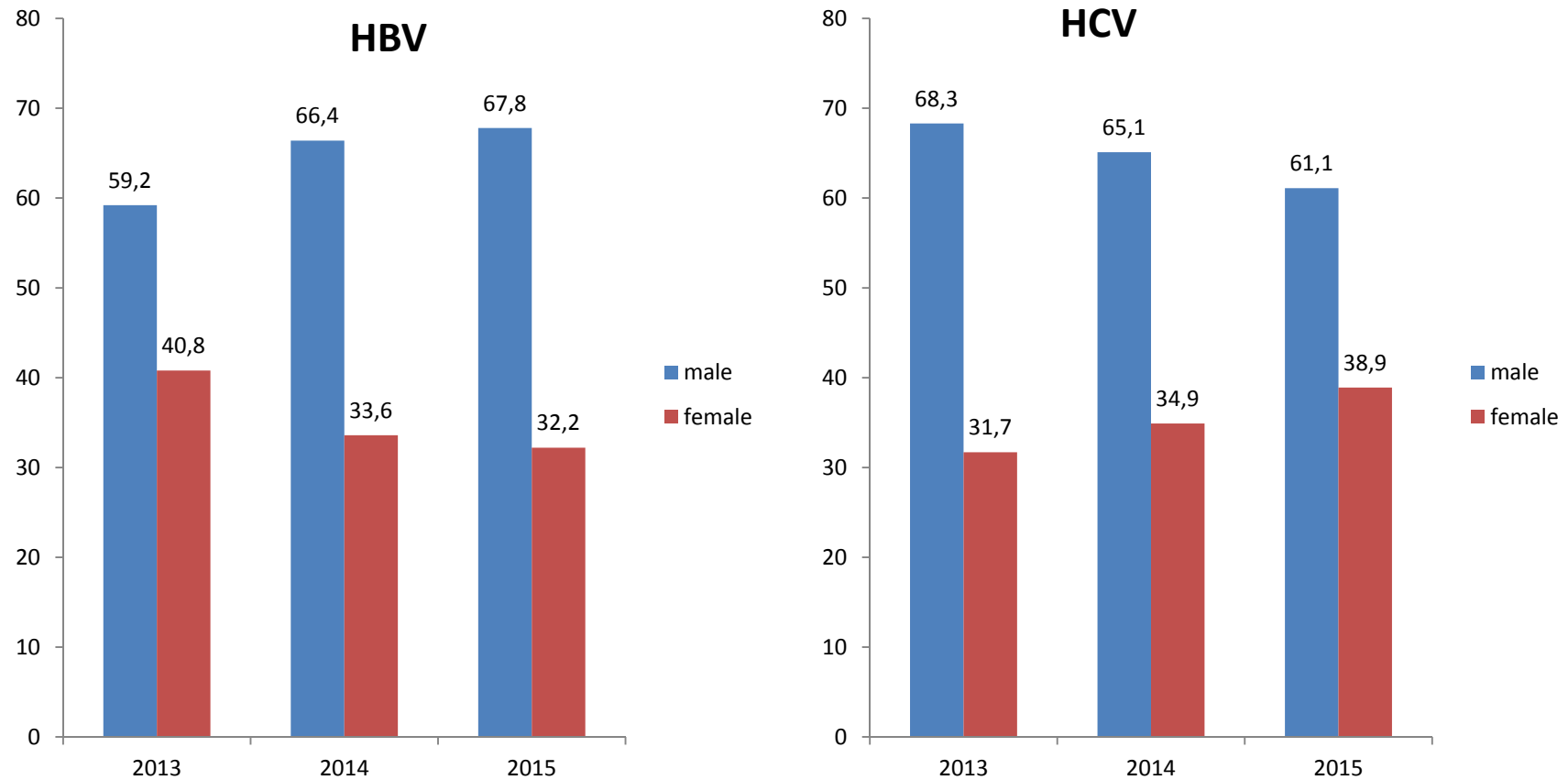
# Incidence of HCV by age group

(no of cases/10000) 2013-2015



- 2013-small difference between the incidence of the age group 25-44 and 45-59 years
- 2014,2015- higher incidence in 45-59 years old
- 2013,2015- low incidence in pediatric age group

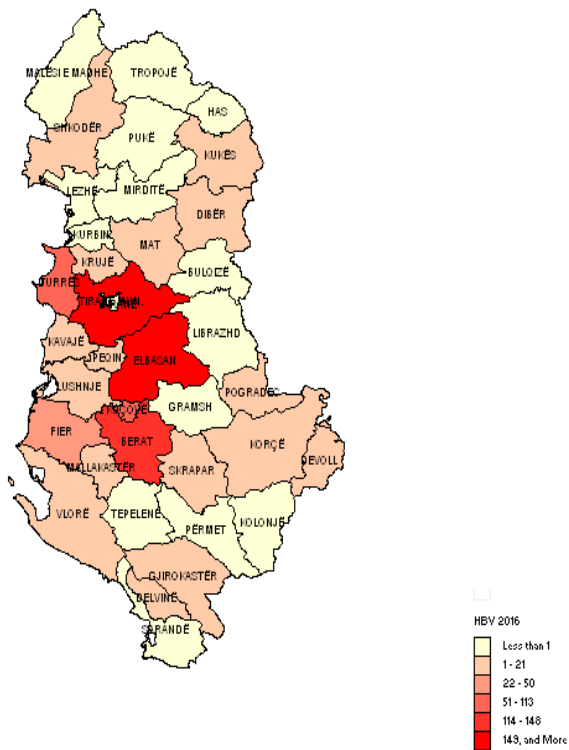
# Distribution of cases by gender(%) 2013-2015



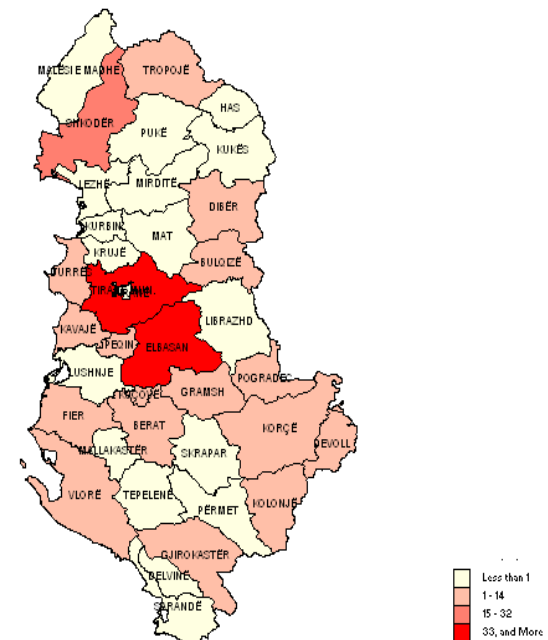
- Male have the higher positivity for HBV and HCV than female in 2013-2015

# Distribution of HBV and HCV in Albania, 2013-2015

Distribution of Viral Hepatitis B, 2013-2015 in Albania

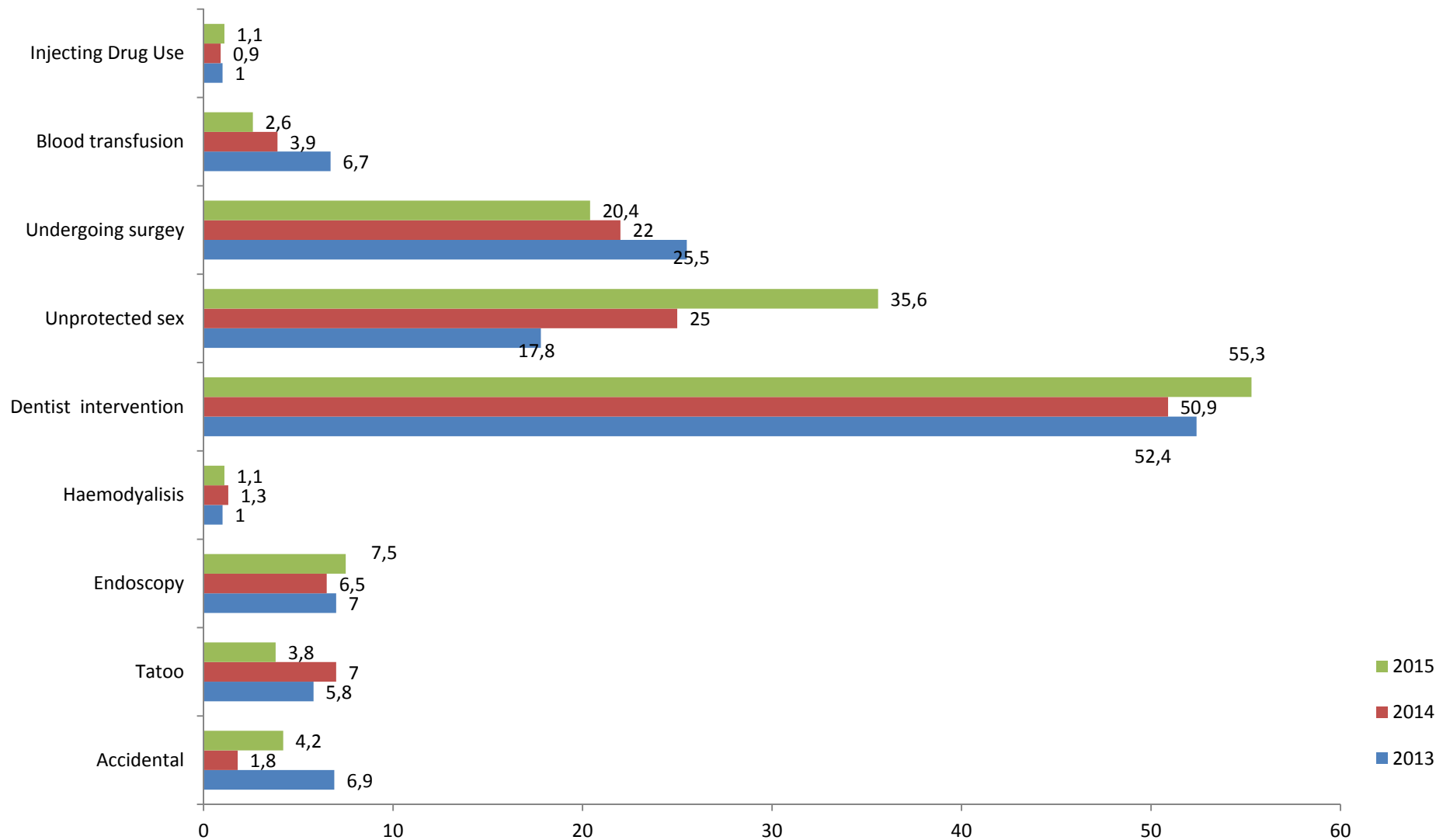


Distribution of Viral Hepatitis C, 2013-2015 in Albania

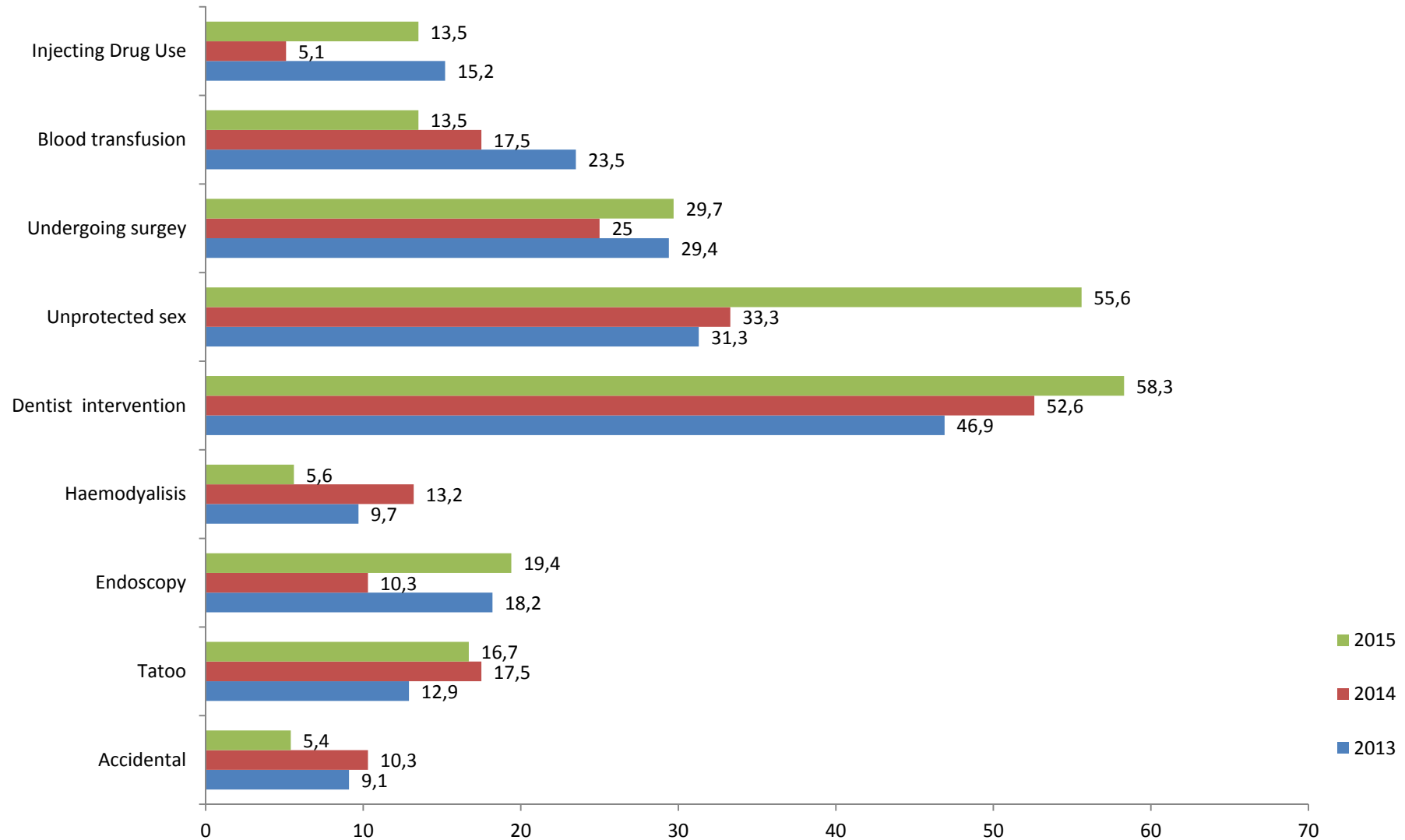




# Viral hepatitis B reports by risk exposure/behavior (%), 2013-2015

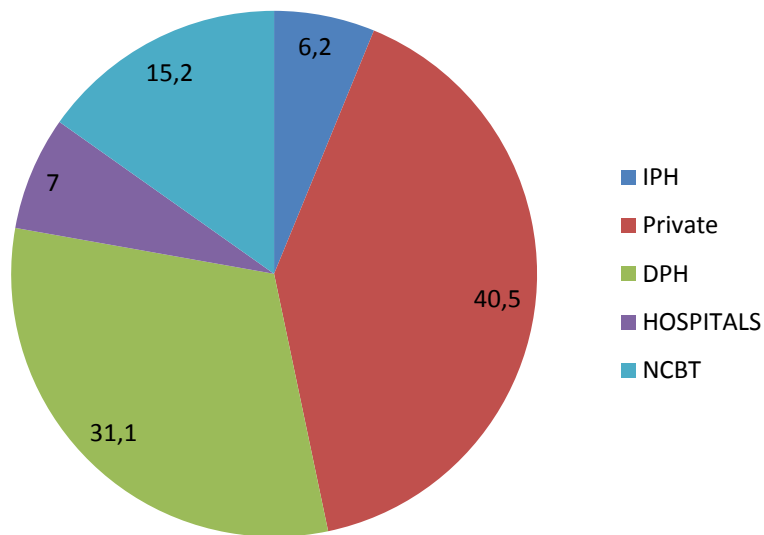


# Viral hepatitis C reports by risk exposure/behavior (%), 2013-2015

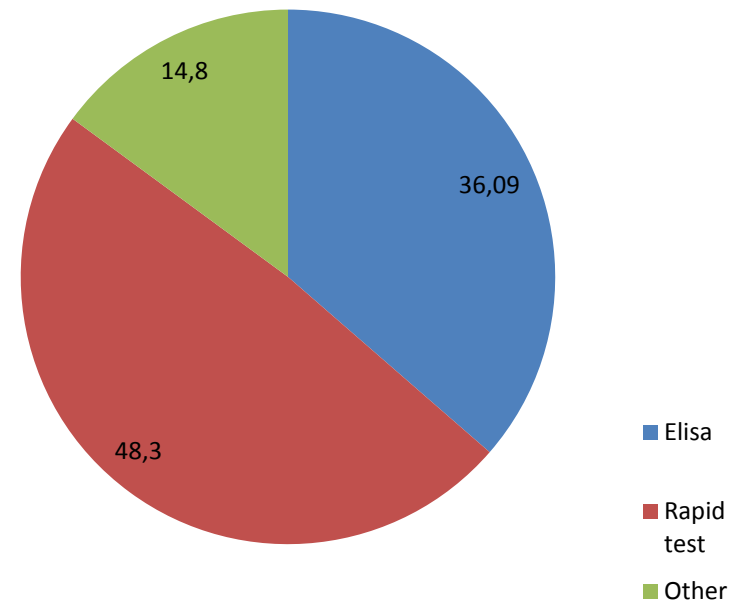


# Laboratory and laboratory methods 2013-2015

Laboratory (%)



Laboratory methods (%)



59.5% of cases are tested in public labs vs 40.5% in private labs

## Hepatitis B & C prevalence data – Low risk populations

Year	Low risk population	HBsAg %, sample size	Anti-HBc %, sample size	HCV %, sample size
2008-2010	General pop	7.2 (721)	57.6 (727)	1.3 (721)
2002-2005	General adult pop	9.4 (602)	62.6 (602)	0.9 (416)
2009-2011		8.4 (448)	43 (212)	
2010-2015		7.11 (885)	42.36 (550)	
2004-2006	General pop	9.5 (3880)		
2004	Pregnant women	6.4 (500)	53.8 (500)	1.2 (499)
2010-2015		6.51 (307)	43.75 (80)	1.38 (288)
2009	Blood don.	7.9 (14352)	59.1 (225)	
1998	recruits	13.27 (369)		1.6 (366)
2000		15.21 (368)	55.95 (361)	
2000	Ped.ages (6-14)	3.9 (584)	22.0 (584)	0.22 (441)

## Hepatitis B & C prevalence data –High risk populations

Year	High risk population	<b>HBsAg</b> % sample size	<b>Anti-HBc</b> % sample size	<b>HCV</b> % sample size
2007	Prisoners	<b>15.9</b> (201)	<b>64</b> (187)	<b>2.9</b> (201)
2004	Hospital staff	<b>8.1</b> (480)	<b>71</b> (480)	<b>0.6</b> (480)
2002-2003	Students of medicine	<b>8.35</b> (668)	<b>46.8</b> (670)	
2005 2015	Roma pop	<b>13.5</b> (600) <b>9.8</b> (273)		<b>0.7</b> (273)
2006-07	IDU	<b>22.8</b> (166)		<b>29.4</b> (163)

## Hepatitis B & C prevalence data –High risk populations

Year	High risk population	<b>HBsAg</b> % sample size	<b>Anti-HBc</b> % sample size	<b>HCV</b> % sample size
2008	MSM	<b>15.2</b> (200)		<b>3.5</b> (200)
2010-2015	Co-inf HIV positive	<b>13.30</b> (278)	<b>69.7</b> (149)	<b>4.2</b> (280)
2005	politransfused	<b>3.7</b> (135)		<b>28.9</b> (135)
2010-2011		<b>2.0</b> (195)		<b>24.1</b> (195)
2008	Hemodialysis	<b>12.3</b> (105)		<b>31.4</b> (105)
2010-2011		<b>11.3</b> (222)		<b>35.6</b> (222)
2010-2015	Victims traficing, domestic violence, etc.	<b>2.7</b> (222)		

# Genotypes of HCV in Albania

Year	Sample size	Genotype 1 (1a,1b,1a/b)	Genotype 2 (2a,2a/c,2c)	Genotype 3 (3a, 3b)	Genotype 4 (4a,4c,4e)
<b>2010-2014</b>	<b>350</b>	<b>62.8 %</b>	<b>18.3%</b>	<b>14.9 %</b>	<b>4%</b>

More frequent is genotype 1, subtype 1b

Genotype 1 is predominant in politransfused and hemodialysis individuals.

Genotype 3 is predominant in IDU .

# Hepatitis D prevalence data

year	population	Sample size	% anti-HDV
1998 & 2000	recruits	49 & 44	0 & 2.27
2004	Cronic hep. B	211	12
2004 & 2010-15	Pregnant women	19	0
2015	Roma pop	25	8
2015- 2016	Co inf HIV Poz	16	6.25
2008-2010	General pop	43	0
2010-2015	Adult pop	62	0



# Conclusions

- Increased of incidence for both HBV and HCV on 2010-2015 because of the enhanced of surveillance system
- The higher positivity is among age active groups
- Dentist intervention and unprotected sex remain the two most risky behavior for both HBV and HCV
- Viral hepatitis B remains to be very common in Albanian population.
- It is very important the reduction of HBsAg prevalence in general population (18% to 7.2%) .
- The prevalence of HCV is low in general population, but is higher in high risk group of population. More frequent is genotype 1, subtype 1b .

# Recommendations

- Evaluation and improvement of surveillance system for viral hepatitis
- Strengthening of the public health laboratory capacities for the diagnosis of those diseases .
- Need for sero prevalence studies in general population and risk groups