

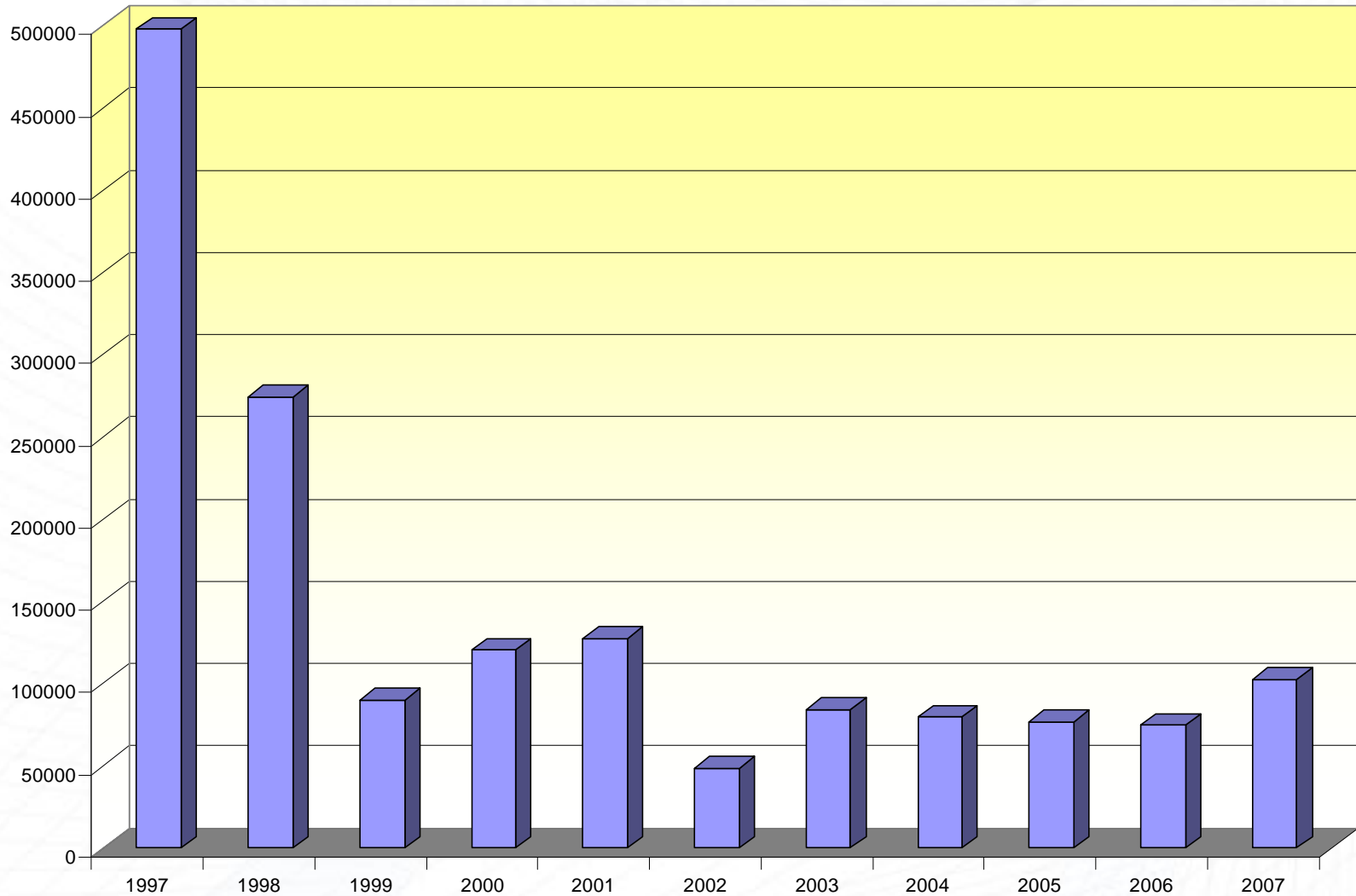


Hepatitis A Epidemiology and Prevention in the European Region

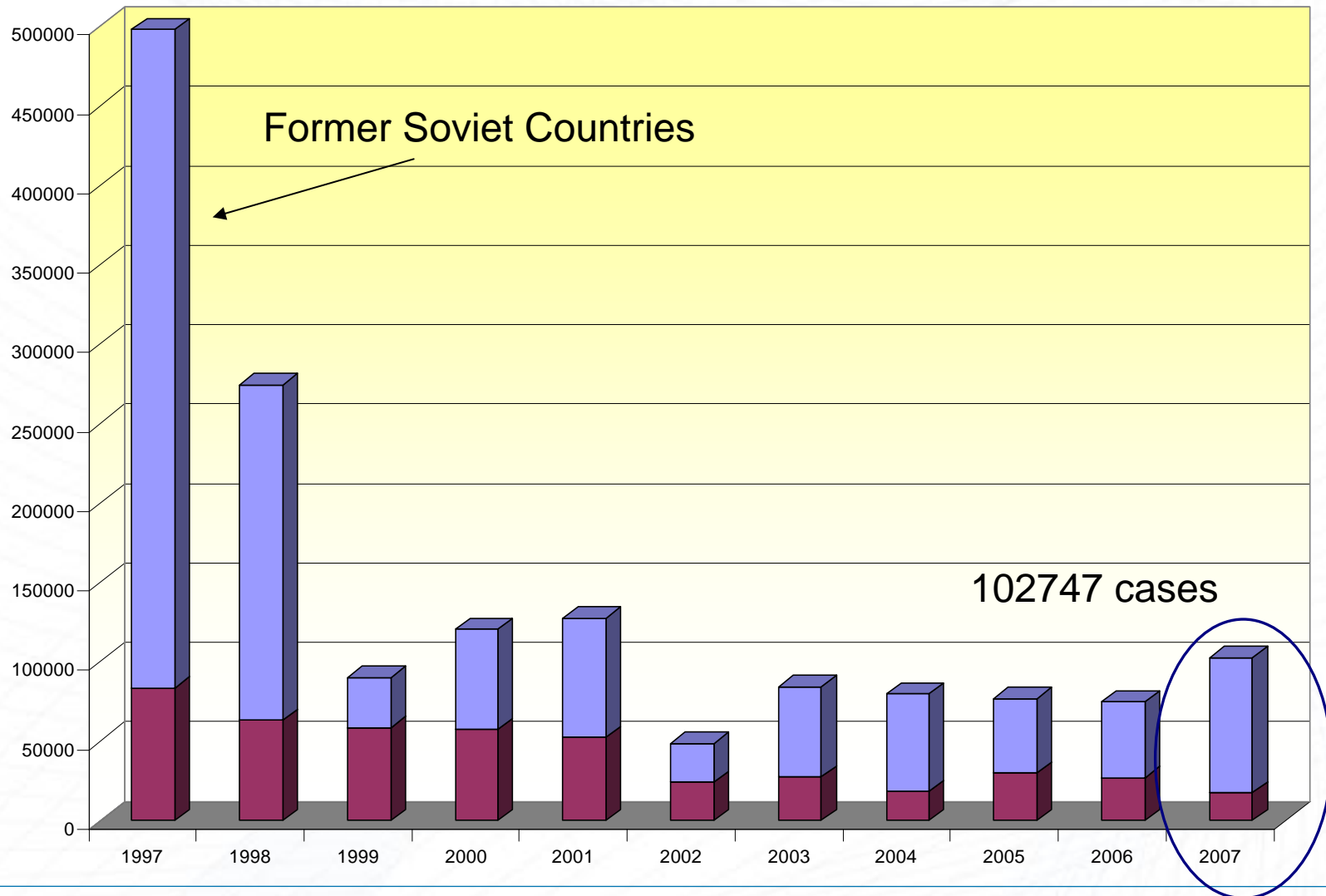
Viral Hepatitis Prevention Board Meeting, Antwerp, 12-13 March 2009

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Reported Hepatitis A Cases WHO European Region 1997-2007



Reported Hepatitis A Cases WHO European Region 1997-2007



Hepatitis A Incidence 2007

Rate per 100,000

Kyrgyzstan	224.21
Tajikistan	160.36
Uzbekistan	117.86
Kazakhstan	69.86

Hepatitis A Incidence 2007

Rate per 100,000

Georgia	42.54
Bulgaria	36.65
Serbia	29.01
Armenia	28.64
Romania	23.24
Azerbaijan	19.63

Hepatitis A Incidence 2007

Rate per 100,000

Greece	2.7	Germany	1.1
Spain	2.25	Sweden	0.8
Belgium	2.08	Ireland	0.7
Italy	1.97	Norway	0.6
France	1.64	U.K.	0.6
Switzerland	1.51	Denmark	0.5
Austria	1.4	Finland	0.3
Czech Republic	1.26	Portugal	0.2

Recent Hepatitis A Outbreaks

- Czech Republic - 2008 1616 Cases
- Latvia - 2008 >2235 Cases
- Slovakia - 2008 569 cases
 - 275 cases in single village, Roma population
 - All children <11 years vaccinated
- Smaller outbreaks in Spain, Ukraine, Russia

Hepatitis A Regional Summary

- Decreasing incidence since 1990's
- Former USSR countries most affected, incidence also increasing in Eastern Europe
- Incidence and source of transmission/risk groups varies widely between countries
- Several outbreaks in past year, varying in size and suspected cause, These include
 - contaminated water,
 - contaminated seafood, imported food products
 - infected food-handlers
 - injecting drug users and
 - men having sex with men (MSM)

Outbreak Response

- Patient isolation
- Quarantine
- Surveillance of contacts
- Disinfection, removal of environmental source
- Targeted vaccination
- Post-exposure prophylaxis by vaccine to contacts
- Preventive vaccination of risk groups
- Risk communication

Outbreak Response

- Country-specific responses vary
- Slovakia -
 - All children up to 10 years in affected village vaccinated in campaign.
 - Follow-up vaccination of children up to 18 years of age
 - Vaccination of risk groups planned.
- Kazakhstan -
 - Regional authorities intend to universally vaccinate 2600 children from 2 to 6 years as well as students in primary classes.

Control Strategies

Belarus	HepA	6 years; Part of country
Cyprus	HepA	Risk Groups
Finland	HepA	IDU
Greece	HepA	> 12, +6 months
Israel	HepA	18, 24 months; and risk groups
	HepAHepB	
Italy	HepA	Travellers, outbreak control
Kazakhstan	HepA	Risk groups
Malta	HepA	Travellers
	HepAHepB	
Monaco	HepA	5 months; 1 year;
Romania	HepA	Outbreak contacts, flooding
San Marino	HepA	on request
	HepAHepB	on request
Slovenia	HepA	In case of epidemiological indications

WHO Regional Office

- **No regional position on Hepatitis A vaccination**
- **Surveillance -**
 - Annual Joint Reporting Form
 - Computerized Information System for Infectious Diseases (CISID)
<http://data.euro.who.int/CISID> maintained by Surveillance and Monitoring team Communicable Diseases Unit (CDS)
 - Event monitoring and Outbreak notification through Alert and Response Team, CDS
 - No regional guidelines
 - Contact definition
 - Risk group identification
- **Viral hepatitis control**
 - through HIV/AIDS and TB team, CDS
- **Outbreak response**
 - Need for recommendations on response measures
- **Complex emergencies**
 - Need for response guidelines
 - Vaccination policy

Outbreak Response

- Riga Meeting:

Guidance on when to consider a universal accelerated vaccine strategy versus the required targeted vaccination coverage of at-risk populations for an impact on the outbreak would be helpful



Thank You