



Surveillance, epidemiology and prevention of Hepatitis A in Italy

Results of the EUROHEP.NET feasibility survey

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COUNTRY CHARACTERISTICS¹

- Total population: 57,482,000
- GDP per capita (Intl \$, 2001): 26,169
- Life expectancy at birth m/f (years): 76.8/82.5
- Health expenditure/capita (Intl \$, 2001): 2,204
- Health expenditure as % of GDP (2001): 8.4

OBJECTIVES and METHODS

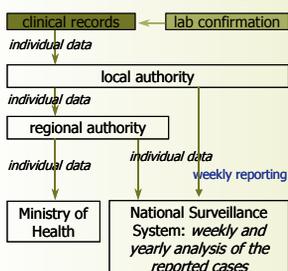
The EUROHEP.NET project is a EU concerted action, supported by the Quality of Life Programme of the fifth framework of the European Community for research. This project addresses issues related to surveillance and prevention of hepatitis A and B in the EU countries, Associated States and Israel. The overall goal is to study the feasibility of a future network on surveillance and prevention and to facilitate the progress of these countries towards enhanced control of hepatitis A and B.

Early 2003, EUROHEP.NET sent a feasibility survey to all participating countries to take stock of the country-specific surveillance and prevention activities for hepatitis A and B. The first achievement of this EU concerted action is to provide in a standardized/comparative way an overview of the different surveillance systems, epidemiology, burden of disease and prevention programmes for these infectious diseases.

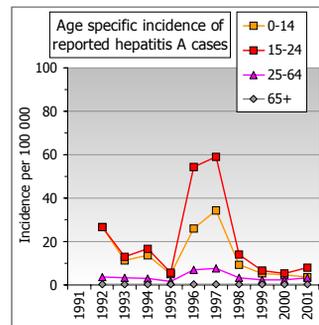
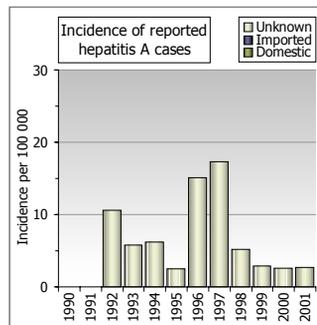
SURVEILLANCE

Surveillance system	Since 1986	
mandatory reporting	yes	passive
voluntary reporting	yes	passive
sentinel	yes	passive
laboratory	no	

Flow chart of the surveillance system



EPIDEMIOLOGY



CASE DEFINITION

EC case definition is used:

- **Probable:** clinical picture compatible with hepatitis (e.g. discrete onset of symptoms and jaundice or elevated serum aminotransferase levels) and epidemiological link.
- **Confirmed:** clinical case definition and laboratory confirmation (IgM antibody to hepatitis A or nucleic acid in serum or antigen in stool)

- Definition of an **outbreak:** two or more cases with a link.

BURDEN OF DISEASE

Acute hepatitis A	1997	1998	1999	2000	2001
Hospitalised cases/100 000 inhabitants	15.63	3.71	2.03	2.38	2.84
Hospitalisation days per case ²	10.5	10.9	9.4	8.5	5.3
Deaths ³	0	1	0	0	0
Mortality (total number of deaths per 100 000)	0.00	0.03	0.00	0.00	0.00
Total number of liver transplants	425	478	564		
Proportion of liver transplants due to hepatitis A					

Outbreaks of hepatitis A: 1997-2001: one outbreak

COMMENTS

- There are two surveillance systems in Italy, one by the Ministry of Health, which is passive, and one by SEIEVA (Sistema Epidemiologico Integrato Epatiti Virali Acute) which is a system more aimed at investigation of risk factors. It is a sentinel based surveillance system for acute viral hepatitis set in Italy since 1985. The systems are clinical and laboratory report-based.
- EC case definition is used for surveillance purposes.
- Hepatitis A is considered an endemic disease because of the high incidence rates. There is an unknown underreporting of cases.
- A universal vaccination programme is in place in the region of Puglia for children starting from 2 years up to adolescent age, since 1997.
- Specific programmes for risk groups are in place.

PREVENTION by active immunisation

Risk group programmes	Available since
injecting drug users	1998
men who have sex with men	no
international travellers to endemic areas	yes
chronic liver disease patients	no
clotting factors disorder patients	1998
medical and paramedical personnel in hospitals including kitchen staff and cleaners	no
people residing in areas of extended community outbreaks	yes
pre-school children attending day care centres	no
day care centre personnel	no
residents and staff of closed communities (Psychiatric Institutions and Institutions for mentally disabled)	1998
refugees residing in temporary camps	no
food-service establishment workers/food handlers	no
household contacts of infected persons	1998
children of migrants visiting an endemic country of origin	no
other risk groups	no

FOOTNOTES

1. Country characteristics: National Institute for Statistics (ISTAT[®] for the population, 2003. Ministry of Health, report on the National Health Status, for mortality data, 2003.
2. The data on disease burden are reported by Seieva notification. The population covered by the Seieva has increased over time and now it is approximately 57% of the total Italian population. Stroffolini et al. Digestive and liver disease 2002; 34: 656-9
3. The mortality data are reported by the SEIEVA only.