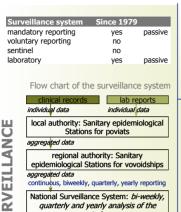


Surveillance, epidemiology and prevention of Hepatitis B in Poland

Results of the EUROHEP.NET feasibility survey

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continuous, biweekly, quarterly, yearly reporting

National Surveillance System: bi-weekly, quarterly and yearly analysis of the reported cases

CASE DEFINITION

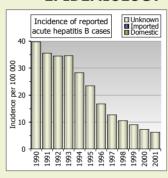
- FC Henatitis B case definition is used:
- Probable: clinical picture compatible with hepatitis (e.g. discrete onset of symptoms and jaundice or elevated serum aminotransferase levels) and HBsAg positive.
- Confirmed: clinical case definition and laboratory confirmation (IgM antibody to antiHBc or HBV nucleic acid in serum).

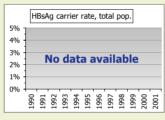
OBJECTIVES and METHODS

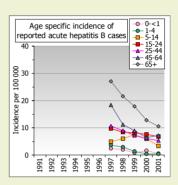
The EUROHEP.NET project is a concerted action, supported by the Quality of Life Programme of the fifth framework of the European Community for research. This project addresses issues related to surveillance and prevention of hepatitis A and B in the EU countries, Associated States and Israel. The overall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

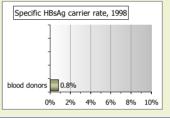
Early 2003, EUROHEP.NET sent a feasibility survey to all participating countries to take stock of the country-specific surveillance and prevention activities for hepatitis A and B. The first achievement of this EU concerted action is to provide in a standardized/comparative way an overview of the different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

EPIDEMIOLOGY¹









BURDEN OF DISEASE²

Hepatitis B	1997	1998	1999	2000	2001
Acute hepatitis B: Hospitalised cases/100000	12.51	10.26	8.91	7.09	5.98
Acute hepatitis B: Hospitalisation days per case					
Chronic hepatitis B: Hospitalised cases/100000					
Chronic hepatitis B: Hospitalisation days per case					
Total: Hospitalised cases/100000					
Total: Hospitalisation days per case					
Deaths	90	71	78	72	60
Mortality (total number of deaths per 100 000)	0.23	0.18	0.20	0.19	0.16
Cirrhosis cases					
Total number of patients with hepatocellular cancer					
Total number of liver transplants not hep B specific					

COMMENTS

- Surveillance for hepatitis B is passive.
- Hepatitis B is considered low endemic in Poland.
- The mandatory reporting system achieves a very high completeness.
- The last conducted sero-epidemiological study was performed on health care workers randomly selected in 1998-1999.
- Universal vaccination of peopates and adolescents are in place.
- Cost of hepatitis B vaccine: private pediatric dose: 10.25€ (Engerix B); public pediatric use: 7.5-8.5€ (Engerix B)

PREVENTION by active immunisation

Universal programme	starting in	starting at age	schedule	coverage rate 2001
universal screening policy for pregnant women				
vaccination of neonates*	1993	<12h	0,1,6	99.6%
vaccination of adolescents*	2000	14 years	0,1,6	93.6%
as the state of th				

* mandatory vaccination

Risk group programmes	available (since)	booster	reimbursed
injecting drug users	no		
men who have sex with men	no		
attendees of STI clinics	no		
dialysis patients*	1993		
groups with occupational risk*	1993		
household contacts of known hepatitis B carriers*	1993		
hospitalised patients	no		
neonates born to HBsAg positive mothers	yes		
other risk groups ³	2000		
* mandatory vaccination			

FOOTNOTES

- 1. Sources of epidemiological data are reliable data based on mandatory epidemiological reports, the data refer to acute hepatitis B cases
- 2. The data source of hospital admission is official notification. Hepatitis B cases are reported for surveillance purposes by medical doctors Mortality data come from the same Central Statistical Office. Data refer to acute hepatitis B.
- 3. Mandatory vaccination exists for some more risk groups : students of medical faculty, students of paramedical schools and persons with chronic liver- and kidney diseases.

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