

# Surveillance, epidemiology and prevention of Hepatitis A in Slovenia

## Results of the EUROHEP.NET feasibility survey

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### COUNTRY CHARACTERISTICS<sup>1</sup>

- Total population: 1,986,000
- GDP per capita (Intl \$, 2001): 18,490
- Life expectancy at birth m/f (years): 72.8/80.5
- Health expenditure/capita (Intl \$, 2001): 1,545
- Health expenditure as % of GDP (2001): 8.4

### OBJECTIVES and METHODS

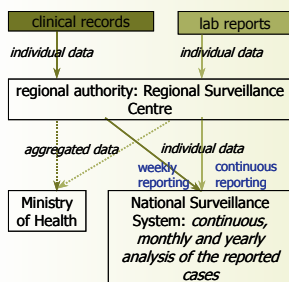
The EUROHEP.NET project is a EU concerted action, supported by the Quality of Life Programme of the fifth framework of the European Community for research. This project addresses issues related to surveillance and prevention of hepatitis A and B in the EU countries, Associated States and Israel. The 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.

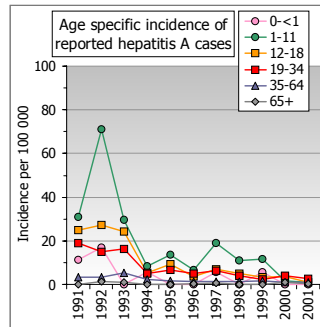
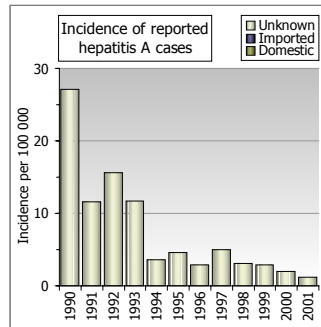
## SURVEILLANCE

| Surveillance system | Since 1950 |         |
|---------------------|------------|---------|
| mandatory reporting | yes        | passive |
| voluntary reporting | no         |         |
| sentinel            | no         |         |
| laboratory          | yes        | passive |

Flow chart of the surveillance system



## EPIDEMIOLOGY<sup>4</sup>



### 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:** the incidence of cases in a specified community which is higher than the average incidence in a specified population at a specified time.

## BURDEN OF DISEASE

| Acute hepatitis A   | 1997 | 1998 | 1999 | 2000 | 2001 |
|---|------|------|------|------|------|
| Hospitalised cases/100 000 inhabitants                      | 3.23 | 2.08 | 2.28 | 1.21 | 0.85 |
| Hospitalisation days per case <sup>2</sup>                  |      |      |      |      |      |
| Deaths  | 0    | 0    | 0    | 0    | 0    |
| Mortality (total number of deaths per 100 000) <sup>3</sup> | 0    | 0    | 0    | 0    | 0    |
| Total number of liver transplants not hep A specific        | 0    | 4    | 9    | 10   | 9    |
| Proportion of liver transplants due to hepatitis A          | 0    | 0    | 0    | 0    | 0    |

**Outbreaks of hepatitis A:** 1997-2001: six outbreaks were reported.

## COMMENTS

- Surveillance for hepatitis A is passive and mandatory.
- Hepatitis A is considered not endemic in Slovenia.
- Last sero-epidemiological study was conducted on blood donors and travellers in 1998.
- Underreporting is calculated by comparison of hospital statistics and morbidity/mortality statistics.

## PREVENTION by active immunisation

| Risk group programmes   | Available since |
|---|-----------------|
| injecting drug users  | 1995            |
| men who have sex with men   | 1995            |
| international travellers to endemic areas   | 1995            |
| chronic liver disease patients*   | 2002            |
| clotting factors disorder patients*   | 2000            |
| medical and paramedical personnel in hospitals including kitchen staff and cleaners                         | no              |
| people residing in areas of extended community outbreaks  | no              |
| 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) | no              |
| refugees residing in temporary camps  | no              |
| food-service establishment workers/food handlers <sup>5</sup>   | 1997-2001       |
| household contacts of infected persons  | no              |
| children of migrants visiting an endemic country of origin  | 2001            |
| other risk groups   | no              |

\* risk groups with mandatory vaccination

### FOOTNOTES

- Country characteristics: [www.who.int/country/en/](http://www.who.int/country/en/)  
Figures are for 2002 unless indicated. Source: the World Health report 2003.
- For the hospital admission data, the clinical records are the basis.
- Mortality data come from the Mortality database.
- The sources of epidemiological data is official notification.
- The vaccination of foodservice establishment workers/food handlers is since 2002 no longer in place.