

Epidemiology and outbreaks of viral hepatitis A in Albania

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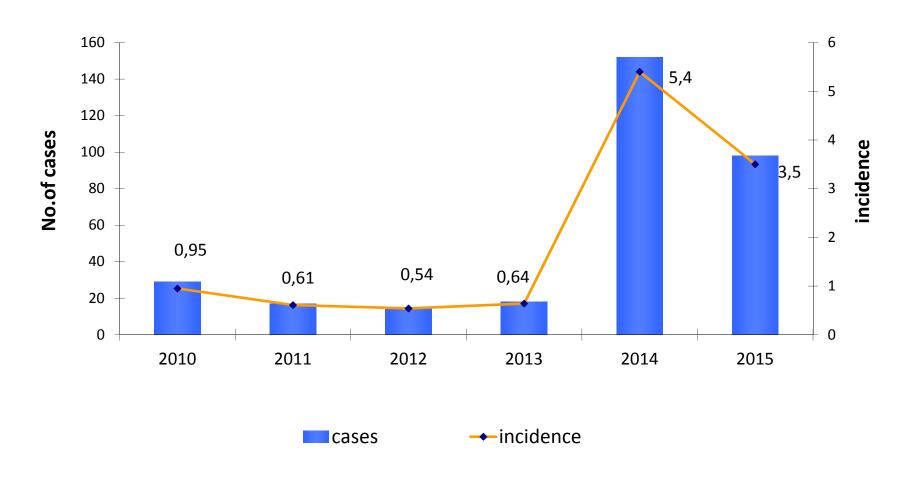
Surveillance system of Viral Hepatitis A (HAV) in Albania

- Major Disease-Based Surveillance System (MDBS- 14 SH)
 - Monthly mandatory reporting aggregated data of 73 diseases

- Syndromic Surveillance System-ALERT
 - Weekly mandatory reporting of infectious syndrome "Jaundice"



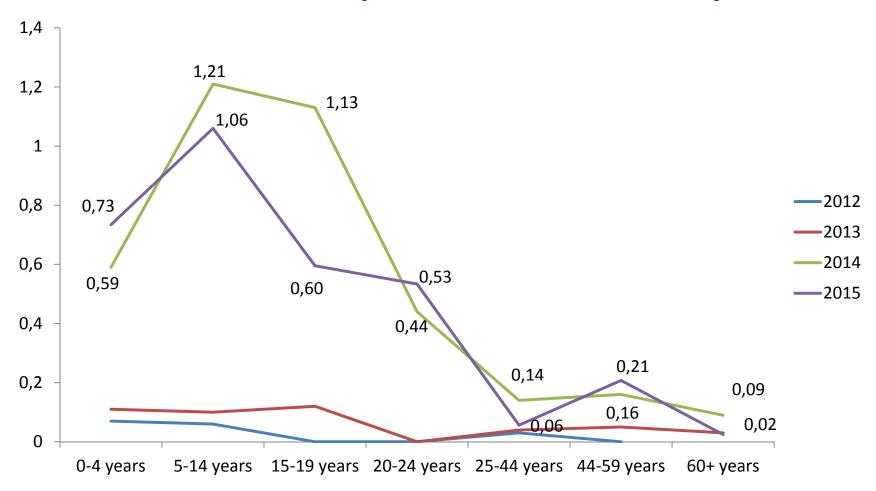
Incidence of HAV in Albania,2010-2015 (no. of cases/100 000)



Increase of incidence in 2014

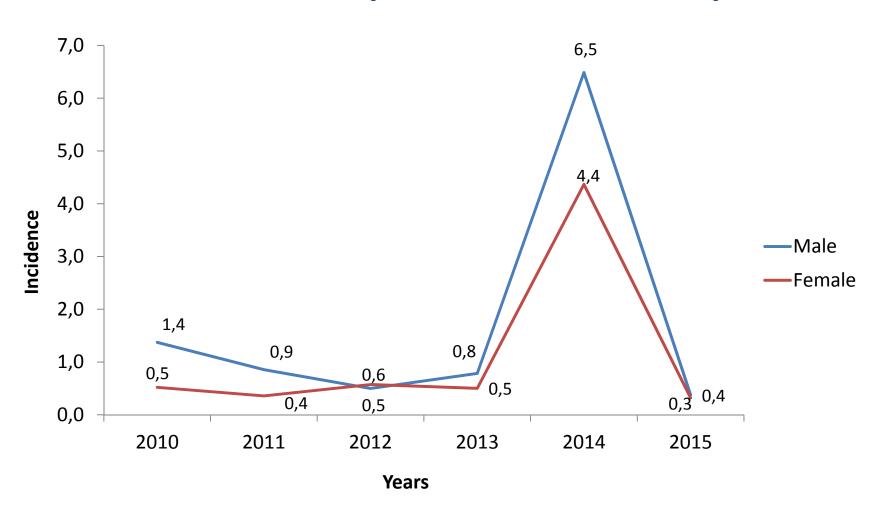


Incidence of HAV by age group in Albania, 2012-2015 (no. of cases/10 000)



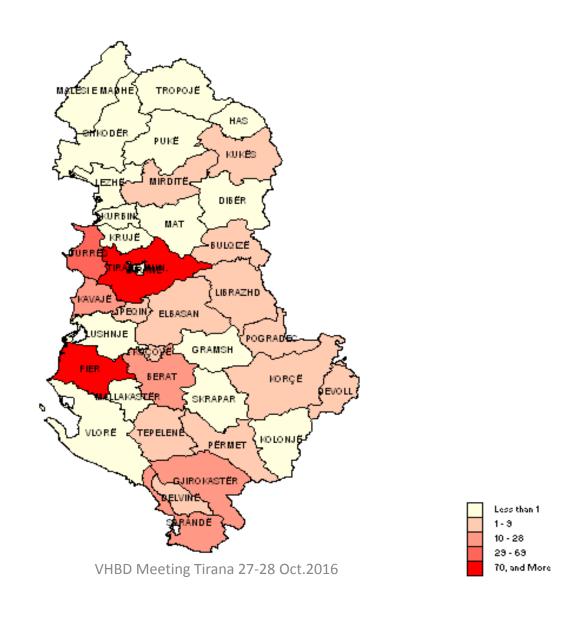


Incidence of HAV by gender, in Albania 2010-2015 (no.of cases/10 000)



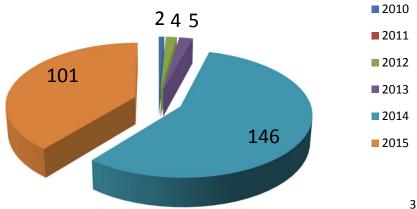


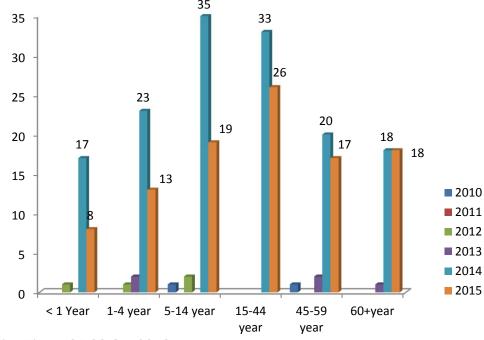
Distribution of HAV in Albania, 2010-2015





Syndrome"Jaundice" from Alert system, 2010-2015





VHBD Meeting Tirana 27-28 Oct.2016



Outbreaks of HAV in Albania 2006-2014

Year	No of cases	District	Month of the year	Duration	Age-group most affected
2006	600	Tirana	July	60 days	5-24 years old
2008	129	Mat	July	30 days	6-10 years old
2010	18	Bulqiza	January	30 days	4-14 years old
2010	110	Elbasan	January	30 days	6-14 years old
2014	54	Fier	July	45 days	2-15 years old
2014	11	Kavaja	April	30 days	3-15 years old
2014	12	Fushe-Kruja	January	30 days	3-15 years old



Prevalence studies

National Laboratory of Reference(IPH)

		No.of person	
Year	Population	tested	% anti HAV
1998	Recruits	363	98
2000	Recruits	361	99.7
2003	Health care workers	122	99
2003	IDU	97	90.7
2004	Recruits	129	99
2000	6-14 years old	441	72
	General adult		
2002-2005	population	611	96
2006-2007	IDU	58	96
2008-2010	General population	726	92



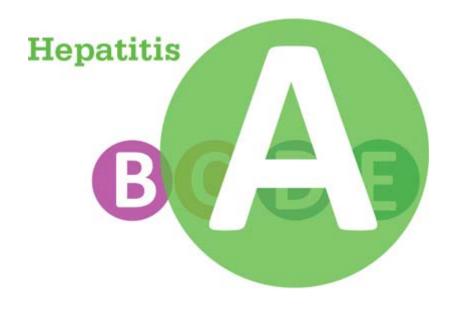
Conclusions

- Higher incidence in 2014, in male and in pediatric age group
- Higher number of cases are reported from Tirana and Fier district
- High prevalence of anti HAV
- The common source of the HAV outbreaks was the contaminated drinking water
- The outbreaks in 2014 were among Roma population
- The most affected age group in outbreaks was the pediatric age group
- Lack of laboratory capacities in districts



Recommandations

- Improve the surveillance system
- Considering the Immunization of children for HAV in case of an outbreak
- Adequate monitoring of drinking water in order to prevent the spread of the HAV virus
- Better collaboration with all the sectors responsible for food safety and drinking water
- Strengthening of the public health laboratory capacities for HAV diagnosis
- Raise awareness for this disease especially among key populations
- Promote good personal hygiene and proper sanitation



THANK YOU FOR YOUR ATTENTION!