

HEPATITIS A OUTBREAK: EPIDEMIOLOGY AND MANAGEMENT

Flemish Agency Care and Health
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AGENTSCHAP
ZORG & GEZONDHEID



CONTENT



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> Notifiable infectious diseases in Belgium

> Hepatitis A outbreak:

- Epidemiology
- Outbreak management
- Barriers and issues
- Recommendations

NOTIFIABLE INFECTIOUS DISEASES



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> List of notifiable infectious diseases in 3 Belgian regions/communities

- determined by Ministerial Decree



> Hep A included in list 3 regions/communities

- Case definition:
 - Probable case: clinical criteria and epidemiological criteria
 - Confirmed case: clinical criteria and lab confirmation (serology or PCR)

> Reason for notification:

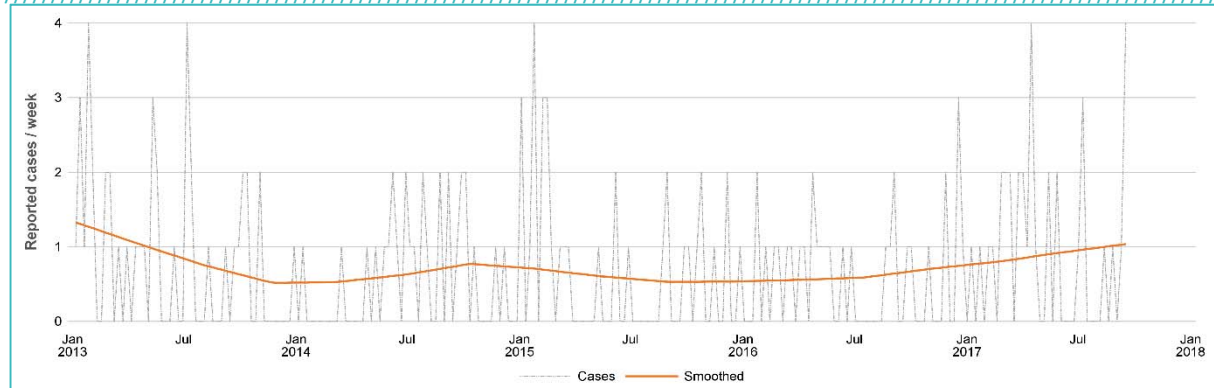
- General:
 - Case and outbreak management → appropriate actions to prevent transmission or to control / stop outbreak
 - Surveillance: adjust policies (e.g. vaccination scheme)
- Specific for Hep A:
 - Prompt notification is important to start actions and avoid transmission to others:
 - > Vaccination of close contacts (≤ 2 weeks, including household, sexual contact)
 - > Hygienic measures
 - > Exclusion work/school (1 week after onset jaundice/T°)

EPIDEMIOLOGY

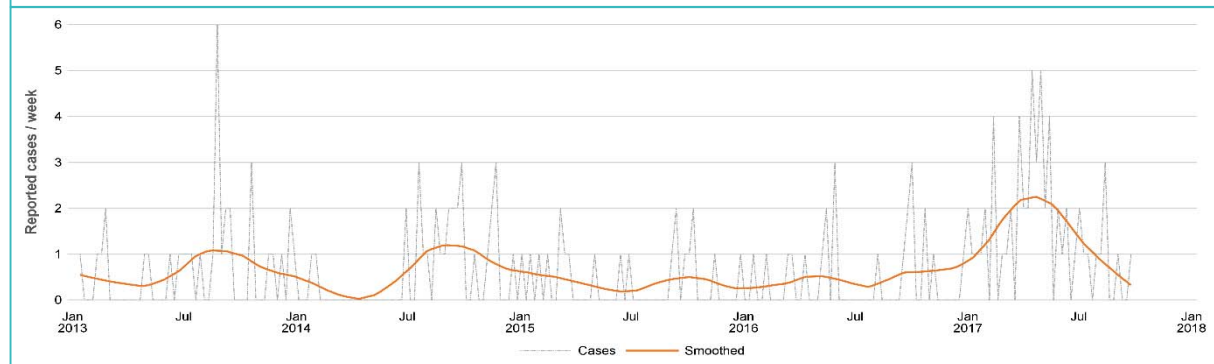


EPIDEMIOLOGY 2013-17: ABSOLUTE NUMBERS

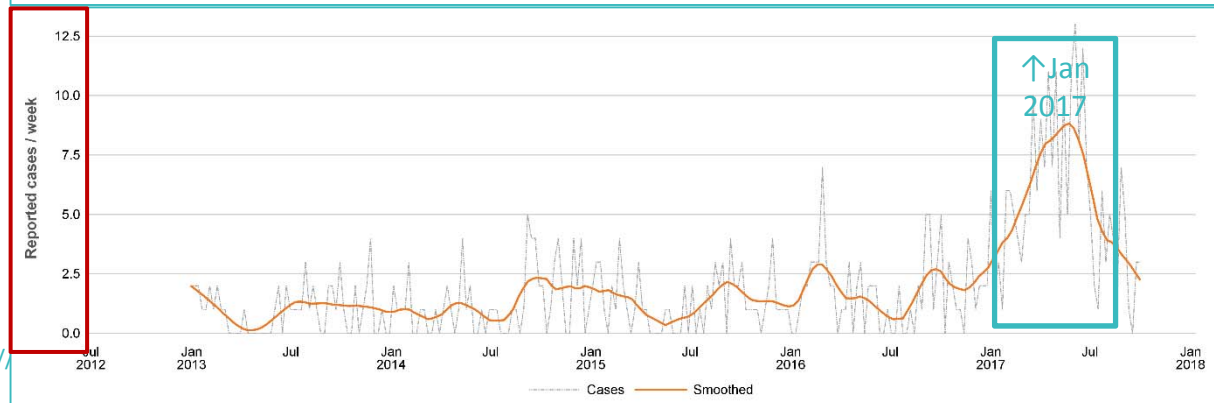
> Walloon region



> Brussels region

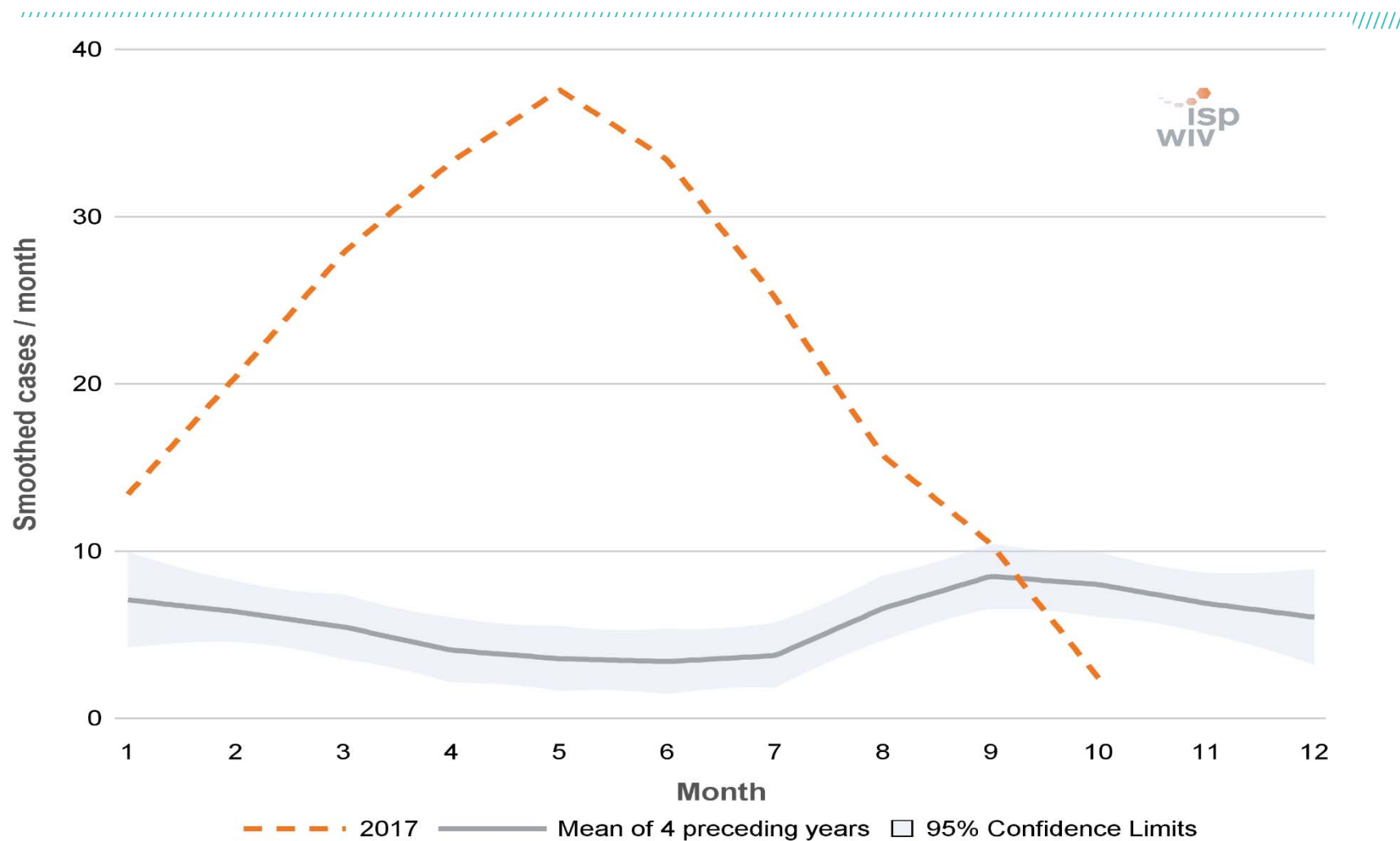


> Flanders



Source: Epilab, Epistat – WIV-ISP,
accessed 23 October 2017

EPIDEMIOLOGY: FLANDERS

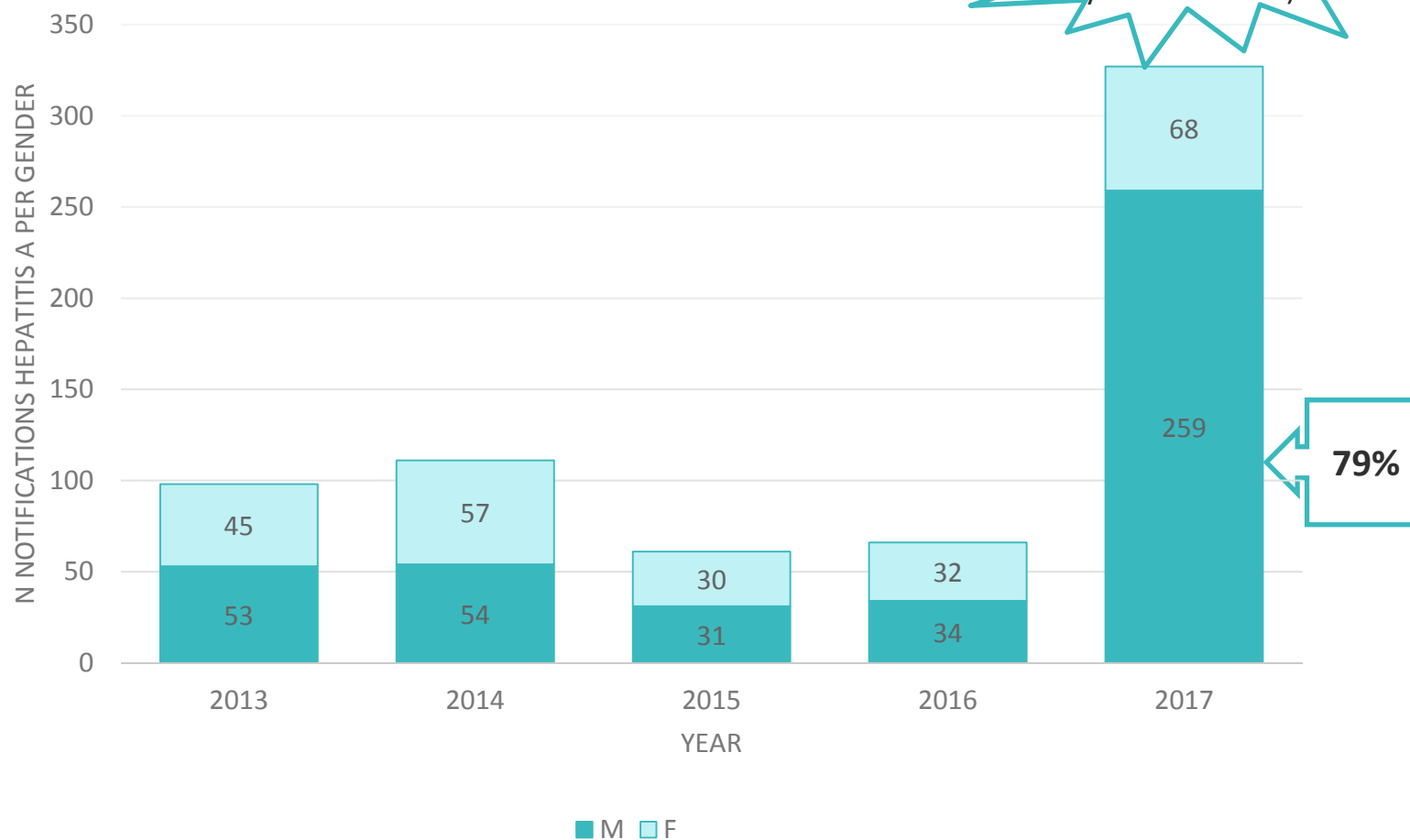


Source: Epilab, Epistat – WIV-ISP, accessed 23 October 2017

EPIDEMIOLOGY 2013-17: GENDER DISTRIBUTION



> Flanders:

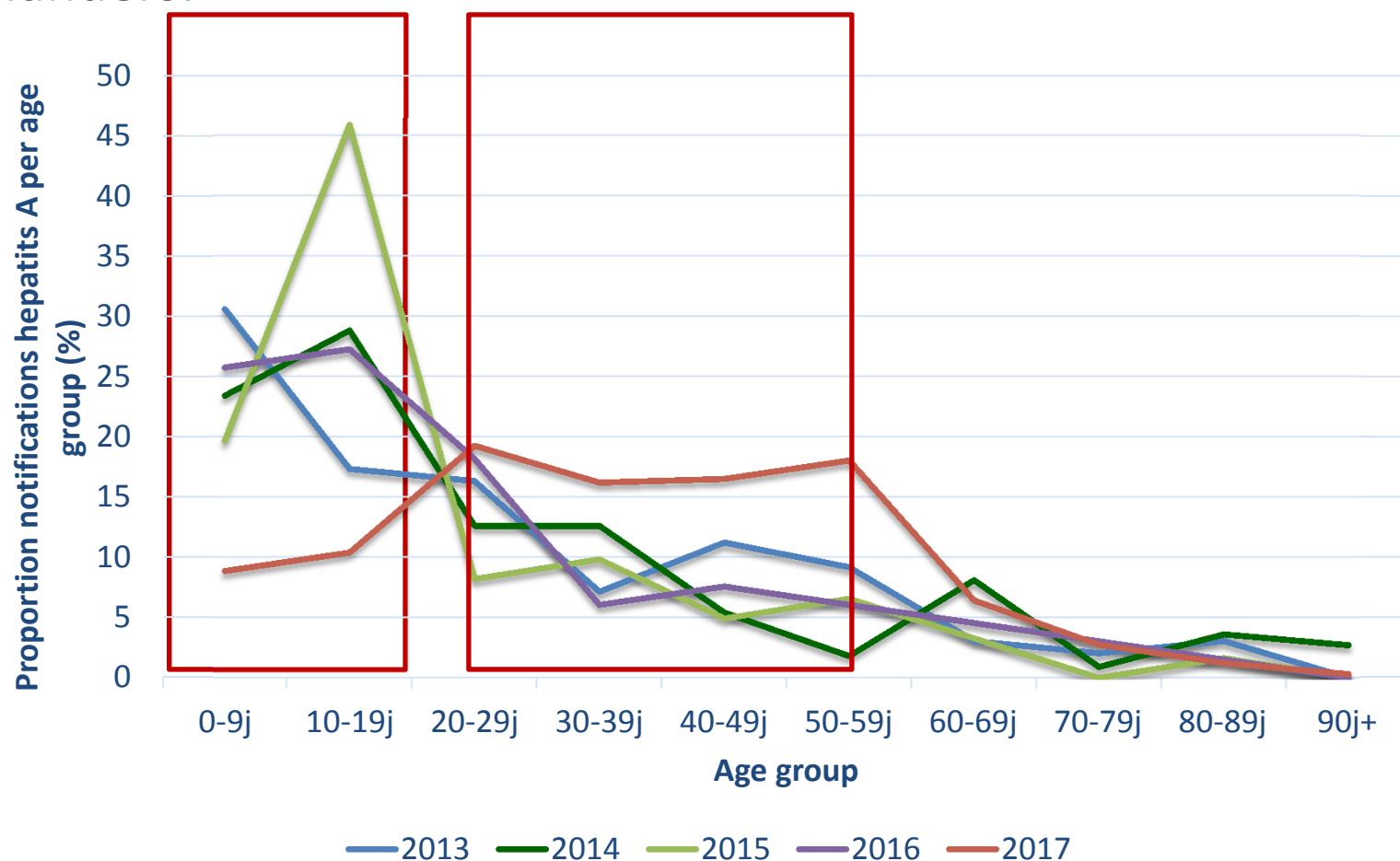


Source: Agentschap Zorg & Gezondheid

EPIDEMIOLOGY 2013-17: AGE DISTRIBUTION



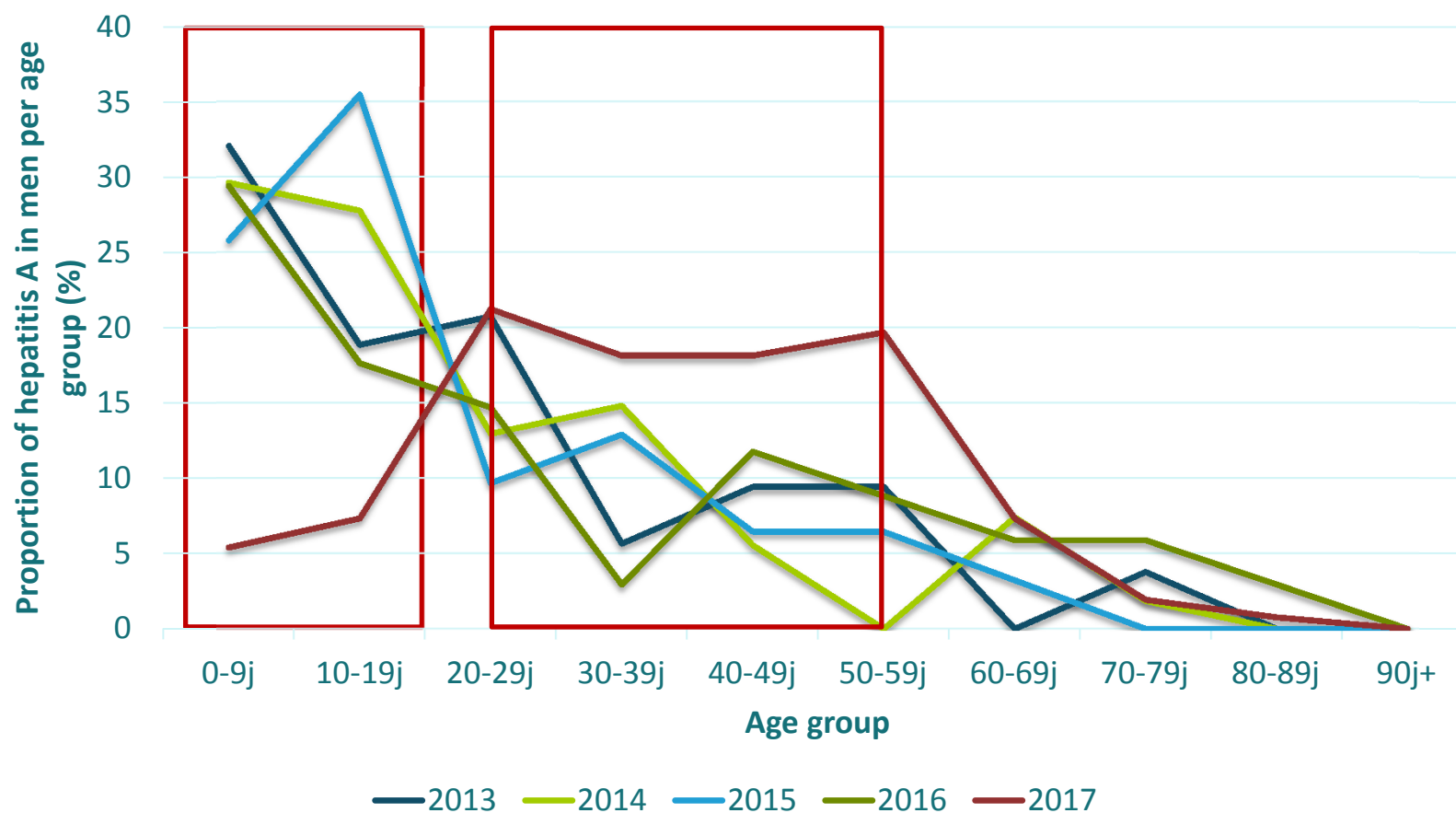
> Flanders:



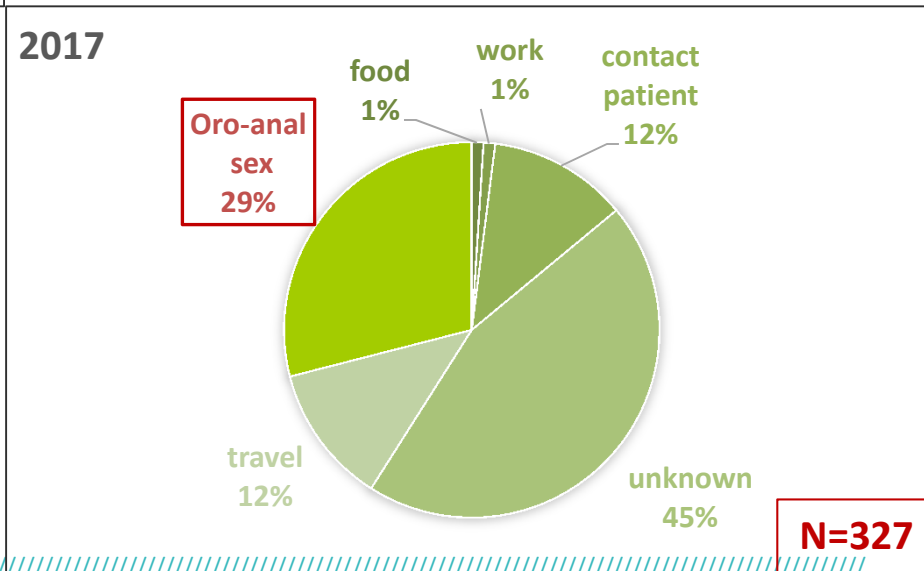
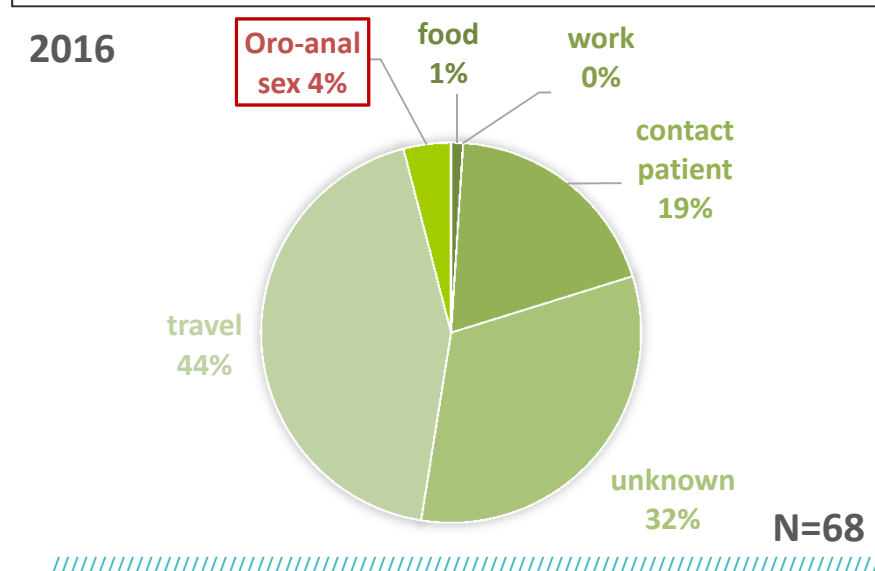
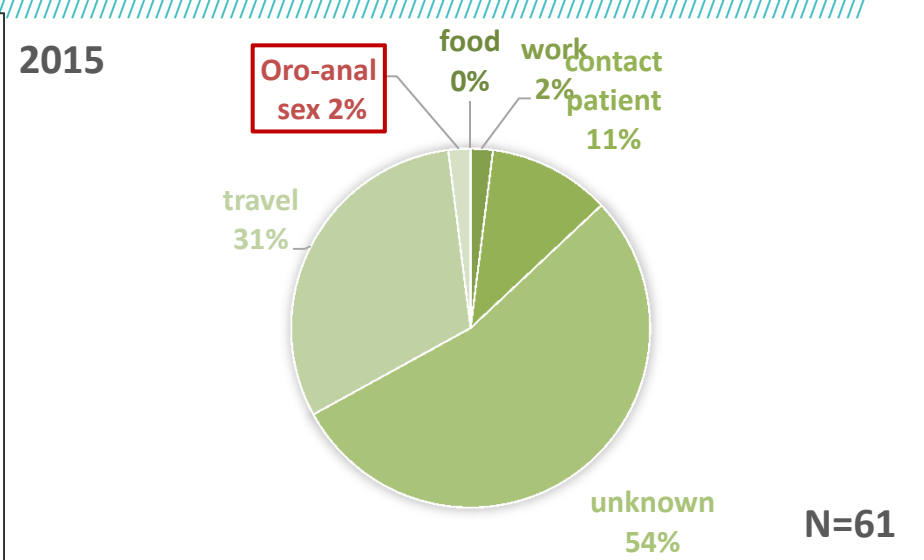
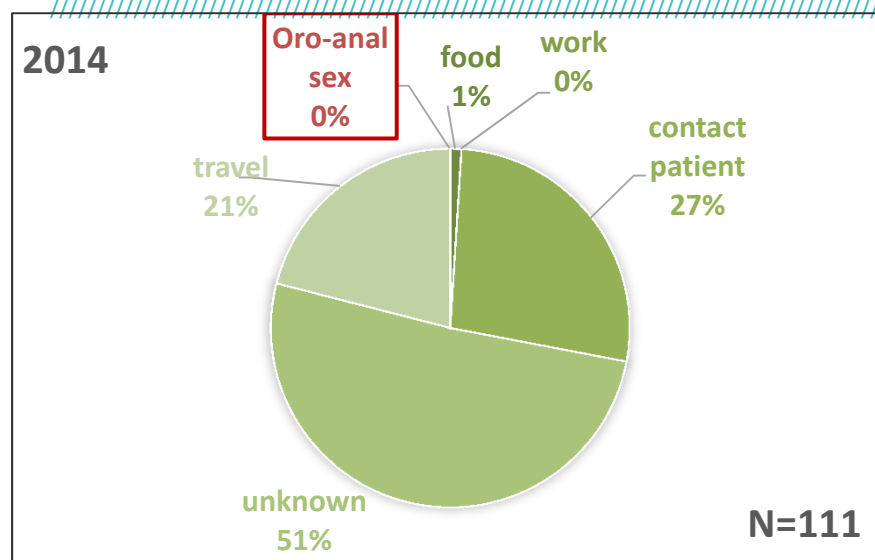
EPIDEMIOLOGY 2013-17: AGE DISTRIBUTION IN MEN



> Flanders: men



EPIDEMIOLOGY 2013-17: FLANDERS, PER SOURCE



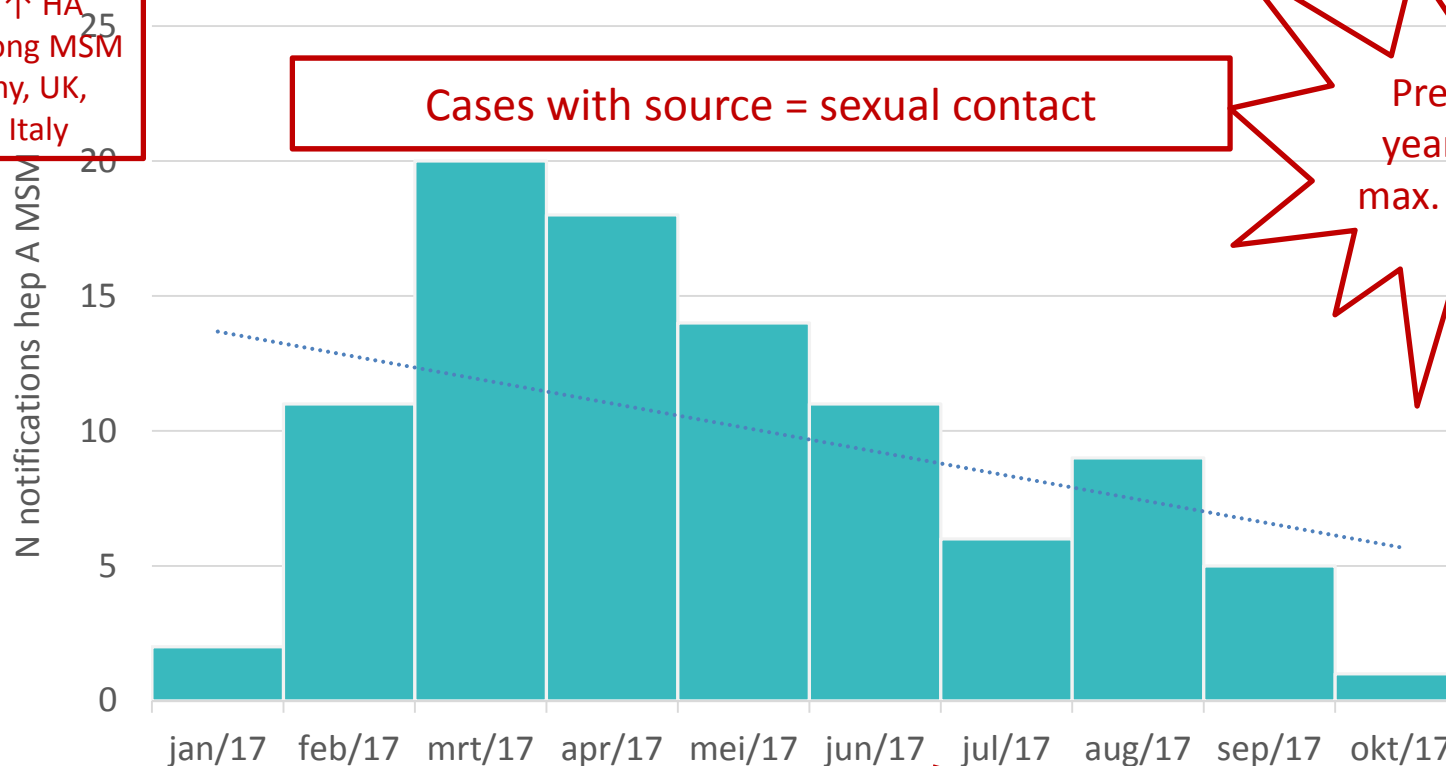
EPIDEMIOLOGY: FLANDERS - MSM



EWRS: Oct/16-
Jan/17 ↑ HA
cases among MSM
Germany, UK,
Spain, Italy

Cases with source = sexual contact

Previous
years : 0 -
max. 3/ year



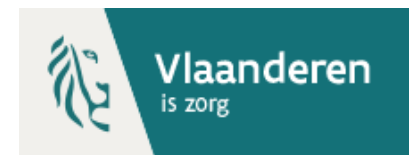
Gay Pride Brussels 29/4-17/05/2016
Gay Pride London 10-26/6/2016
Gay Pride Madrid 29/6-3/7/16
Gay Pride Amsterdam 23/7-7/8/16
Gay Pride Berlin 23/7 (nl. late June)

Gay pride Madrid 23/6-2/7/17

Gay pride Brussels 20/5/17

Source: Flemish Agency of Care and Health, 2017

OUTBREAK MANAGEMENT



ACTIONS TAKEN DURING OUTBREAK



> Case management:

- Food handlers → advice Federal Agency for Safety of Food Chain



> Sequencing :

- From June 2016 onwards: hepatitis A outbreak in 17 EU/EEA countries, mainly among MSM → 3 co-circulating strains:
 - > VRD_512_2016 (UK), V16-25801 (Germany), RIVM-HAV 16-090 (The Netherlands);
 - > UK strain = 1st reported and most prevalent in (southern) Europe
- N samples to NRC for genotyping: 61 Flanders, 4 Brussels, 1 Wallonia
 - > **58% RIVM-HAV 16-090;**
 - > 33% UK strain [VRD_512_2016];
 - > 2% Munich-Frankfurt-Berlin strain [V16-25801];
 - > 8% genotype (I B)
 - Stop sequencing around April 2017, except if source unknown and male
 - Sequencing also confirmed transmission to broader population

ACTION TAKEN DURING OUTBREAK (2)



> Sensibilization

- Health professionals: letter to GP/vaccinators, updates via newsletter

<https://www.zorg-en-gezondheid.be/nieuwsflash-infectieziekten>



- MSM: information, focus on sensibilization for hepatitis A vaccination (SENSOA, Ex Aequo, Arc en ciel Wallonie – before gay pride Brussels May 20th 2017)

<http://holebi.info/phpnews/kortnews.php?action=fullnews&id=15993>

<http://zizo-online.be/article/11508>



- Press release http://www.standaard.be/cnt/dmf20170804_03002448



ACTION TAKEN DURING OUTBREAK (3)



> International

- February 2017
 - Epidemic Intelligence Information System (EPIS - ECDC, via WIV): data sharing of samples with sequencing
 - Rapid Risk Assessment (ECDC): Belgium included
 - Early Warning Response System (ECDC)
- April 2017:
 - EPIET project: participation to descriptive part
 - Publication (ECDC, draft August 2017)



ISSUES AND BARRIERS



- > Specific groups: difficult to reach!
- > Source : taboo around sexual behavior!, privacy sphere!
- > Logistics around case management (vaccine/ limited availability in Belgium of single dose hepatitis A for adult)
- > Outreach vaccination on specific events: lack of capacity / budget (no specific vaccination programme focussing on MSM)

RECOMMENDATIONS



RECOMMENDATIONS



> General:

Evaluatie van universele en
doelgroep hepatitis A
vaccinatie opties in België
KCE reports vol. 98A



- Report 2008: study of effectiveness and cost effectiveness of possible vaccination strategies in Belgium for hepatitis A, based on the available epidemiological data.
- Belgium: not endemic for hepatitis A
- Recommendation: “Public funding for hepatitis A vaccination is recommended for children 1-12 y who travel to high-endemic countries”

RECOMMENDATIONS



> May 2017: Recommendations ECDC

- Where hepatitis A vaccination is not universally offered to MSM, the following groups could be prioritized for vaccination:
 - MSM living in areas of ongoing outbreaks
 - MSM travelling to destinations reporting outbreaks of hepatitis A among MSM
 - MSM that will attend WorldPride festival in Madrid, 23 June–2 July 2017 and are likely to engage in risky sexual practice
 - MSM at risk of severe outcomes from hepatitis A, for example those with hepatitis B and/or hepatitis C and those who inject drugs.



> Most effective preventive measure to avoid future outbreaks in MSM population:

- Vaccination MSM (Advice Belgian High Health Council, 2013)
- Raising awareness of preventive measures through information campaigns targeting MSM

QUESTIONS?



EPIET STUDY



Confirmed hepatitis A cases by strain and date of reporting (n=1400), 1 June 2016 – 31 May 2017, participating EU/EEA countries

Confirmed hepatitis A cases by strain and geographical distribution (n=1400), 1 June 2016 – 31 May 2017, participating EU/EEA countries

