

Hepatitis E

Revision Dates

Case Definition	March 2011
Reporting Requirements	May 2018

Case Definition

Confirmed Case

Laboratory confirmation with or without clinical illness^(A)

- Detection of hepatitis E nucleic acid (e.g., PCR) in an appropriate clinical sample
- OR**
- Seroconversion or significant difference between acute and convalescent anti-HEV IgG antibody titres tested four to six weeks apart.

Probable Case

Clinical illness^(A) and one of the following:

- Epidemiologically linked to a confirmed case
- OR**
- Absence of other etiologies of hepatitis and only one specimen positive for anti-HEV IgG antibody and with recent travel to or living in an endemic area^(B).

NOTE: A single positive anti-HEV IgM result, in the presence of clinical illness, may be indicative of current or recent infection, however further laboratory testing is warranted to rule out a false positive result. It is recommended that a follow-up specimen is collected two weeks later and submitted again for HEV testing. A second specimen indicating a significant difference or seroconversion in HEV IgG antibody titres satisfies the laboratory criteria for confirmed case.

^(A) Clinical illness is characterized by discrete onset of symptoms and jaundice or elevated serum aminotransferase levels.

^(B) Highly endemic areas include Indian subcontinent, Egypt, and parts of China. Countries with poor sanitation should be assumed to have a high risk for endemic HEV infection and disease. (1)

Reporting Requirements

1. Physicians, Health Practitioners and others

Physicians, health practitioners and others shall notify the Medical Officer of Health (MOH) (or designate) of the zone, of all confirmed and probable cases in the prescribed form by mail, fax or electronic transfer within 48 hours (two business days).

2. Laboratories

All laboratories shall report all positive laboratory results by mail, fax or electronic transfer within 48 hours (two business days) to the:

- Chief Medical Officer of Health (CMOH) (or designate), and
- MOH (or designate) of the zone.

3. Alberta Health Services and First Nations Inuit Health Branch

- The MOH (or designate) of the zone where the case currently resides shall forward the initial Notifiable Disease Report (NDR) of all confirmed and probable cases to the CMOH (or designate) within two weeks of notification and the final NDR (amendment) within four weeks of notification.
- For out-of-province and out-of-country reports, the following information should be forwarded to the CMOH (or designate) by phone, fax or electronic transfer within 48 hours (two business days):
 - name,
 - date of birth,
 - out-of-province health care number,
 - out-of-province address and phone number,
 - positive laboratory report, and
 - other relevant clinical / epidemiological information.

References

- (1) Anderson DA. Hepatitis E virus. In: Mandell GL, Bennett JE, Dolin R, editors. Mandell, Douglas, and Bennett's principles and practice of infectious diseases. 7th ed. ed. Philadelphia, PA: Churchill Livingstone Elsevier; 2010. p. 2411-2423.

Superseded