

Hepatitis E

Case Definition

Confirmed Case

Laboratory confirmation with or without clinical illness^[1]:

- 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^[1] 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^[2].

^[1] Clinical illness is characterized by discrete onset of symptoms and jaundice or elevated serum aminotransferase levels.

^[2] 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)

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.

Reporting Requirements

1. Physicians

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

2. Laboratories

All laboratories, including regional laboratories and the Provincial Laboratory for Public Health (PLPH), shall report all positive laboratory results by mail, fax or electronic transfer within 48 hours (two days) to the:

- Chief Medical Officer of Health (CMOH) (or designate),
- MOH (or designate) and the
- Attending/ordering physician.

3. Alberta Health Services

- The MOH (or designate) shall report in the prescribed form (as detailed in the Notice dated March 22, 2011) using the preliminary 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-zone reports, the MOH (or designate) first notified shall notify the MOH (or designate) where the client resides by mail, fax or electronic transfer and fax a copy of the positive laboratory report within 48 hours (two days).
- 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 days) including:
 - name,
 - date of birth,
 - out-of-province health care number,
 - out-of-province address and phone number,
 - attending physician (locally and out-of-province) and
 - positive laboratory report (faxed).

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