

THE VIRAL HEPATITIS ENDEMY IN ROMANIA. UP TO DATE REVALUATION AND IMEDIATE PRACTICAL IMPLICATIONS (REPORT)

M. Angelescu

Clinic of Infectious Diseases,
University of Medicine and Pharmacy, Bucharest

Serologic diagnosis by evidencing the specific markers of the hepatitis viruses (HAV, HBV, HDV, HCV, HEV) allowed the correct estimation of nowadays weight of each type of viral hepatitis in Romania.

The decline of morbidity due to hepatitis A. Commencing with 1985, the morbidity due to hepatitis A diminishes so much that in the latest 2 years, the number of the icteric forms was 25 times lower than in 1980. Hepatitis A autolimited, benign infection of childhood and adolescence which develops immunity to reinfection, after a prolonged hyperendemia of 30 years, lead to natural immunization in most of the population.

The present endemy in Romania is dominated by hepatitis A showing a continous decline.

Dramating rising of hepatitis B. In Romania, in 1975, 3,5% of population showed HBsAg, while in 1992 the proportion rised to 10-15%. The present endemy is characterised by the prevalence of HBV in new borns, little children and teenagers up to 18 years aspect unknown 20-30 years ago. Iatrogenic transmission is still important, but an alarming increased of the sexual transmitted viral hepatitis is added.

Coinfection and superinfection with delta virus. The circulation of HCV in our country seems to active proportions comparable to that of HBV. The serologic diagnosis performed commencing with 1990 allowed the following findings:

- in non transfusion (sporadic) non A non B acute hepatitis, HCV markers were revealed in 65% of cases;
- posttransfusional hepatitis were due to HCV in 90% of cases;
- in 80% of the chronic hepatitis and non B cirrhoses, HCV markers have been found.

Infection with associated hepatitis viruses. One of the features of the present endemy is the concomitent presence, in the same patient of various combinations of the viral markers. Double, triple and quadruple infection represent a huge source of infection, the same patient being the source of all three parenteral transmitted viruses (by blood and sexual transmission).

It is generally accepted that in 90% of the cases, the chronic liver disease has a viral etiology, involving one or several hepatitis viruses with parenteral transmission (HBV, HCV, HDV).

In 85% of the cases with liver carcinoma, markers of HBV, HCV or associations of these have been found, which make it obvious that hepatitis viruses are oncogenic.

The new orientation of the antiepidemic policy. Considering the present endemy in Romania we must have in view two priorities:

- the adjustement of the legislation concerning viral hepatitis (the last one being decreeded 10 years ago);
- drawing up a National Program for prevention and control.

It is necessary to take account of the ominous source of infection represented by the non icteric forms of the acute virale hepatitis, healthy

carriers of HBV, HDV and HCV, as well as postviral chronic hepatites and cirrhoses. Chronic liver disease is as infectious as acute viral hepatitis.

Finally, the report details a complex plan for prevention and control, insisting on vaccination against HBV. It is stressed the obligatory character of vaccination in new borns with revaccination in teenagers, as well as in risk groups for HBV and HDV infection.