

3.4 Hepatitis A

Summary

Number of cases, 2008: 42
Crude notification rate, 2008: 1/100,000 population
Number of cases, 2007: 32

Hepatitis A virus causes an acute, usually self-limiting disease of the liver. It is primarily transmitted from person to person via the faecal-oral route and is associated with poor hygiene and sanitation. Common source outbreaks due to contaminated food or water may also occur.

The incidence of hepatitis A in Ireland has been low in recent years and remained low in 2008, with 42 cases notified. This corresponds to a crude notification rate of 1/100,000 population and represents a 31% increase compared to 2007, when 32 cases were notified (figure 1). Case classification was reported for all cases. Forty one cases were laboratory confirmed and one was classified as probable.

Forty three percent of cases were male (n=18) and 57% were female (n=24). All age groups were affected (figure 2).

Thirteen cases were linked to travel outside of Ireland, three cases were contacts of cases infected outside of Ireland and a further seven cases had travelled outside of Ireland within the incubation period of the disease but could also have been infected in Ireland.

Of the remaining cases, eleven were infected in Ireland (five associated with family outbreaks) and information on country of infection was not available for eight.

Four hepatitis A outbreaks were reported in 2008. Two were associated with travel. The first involved two young adults, one of whom was infected in South Africa, and the second involved two children, one of whom had travelled to Pakistan. The other two outbreaks were family or extended-family outbreaks. One involved three children and the second involved one adult and one child.

There was a fatality in one person notified as an acute hepatitis A case.

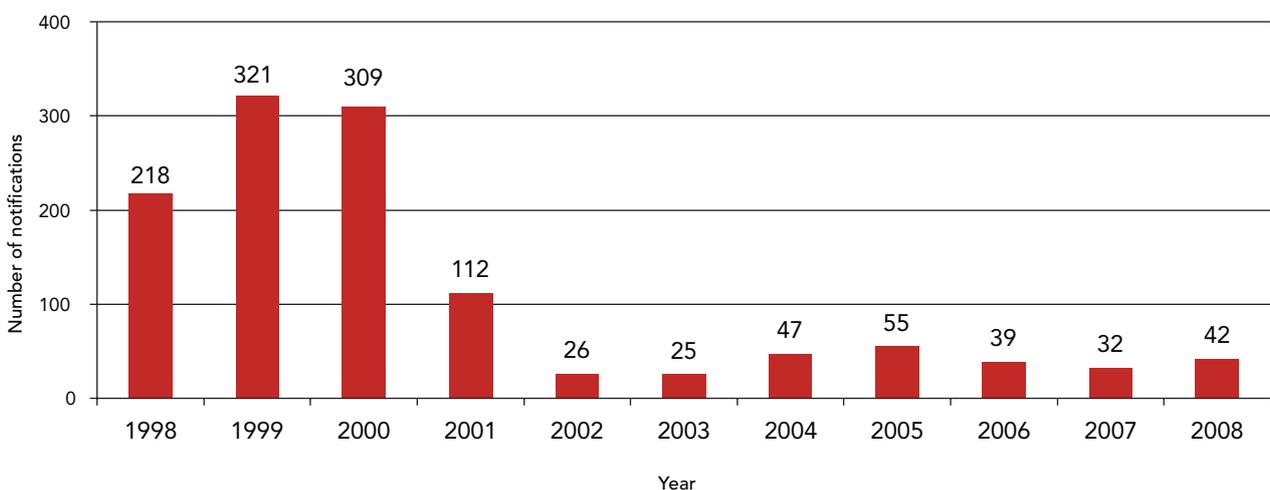


Figure 1. Number of hepatitis A notifications, 1998-2008

The figures presented in this summary are based on data extracted from the Computerised Infectious Disease Reporting (CIDR) System on 7th August 2009. These figures may differ from those published previously due to ongoing updating of notification data on CIDR.

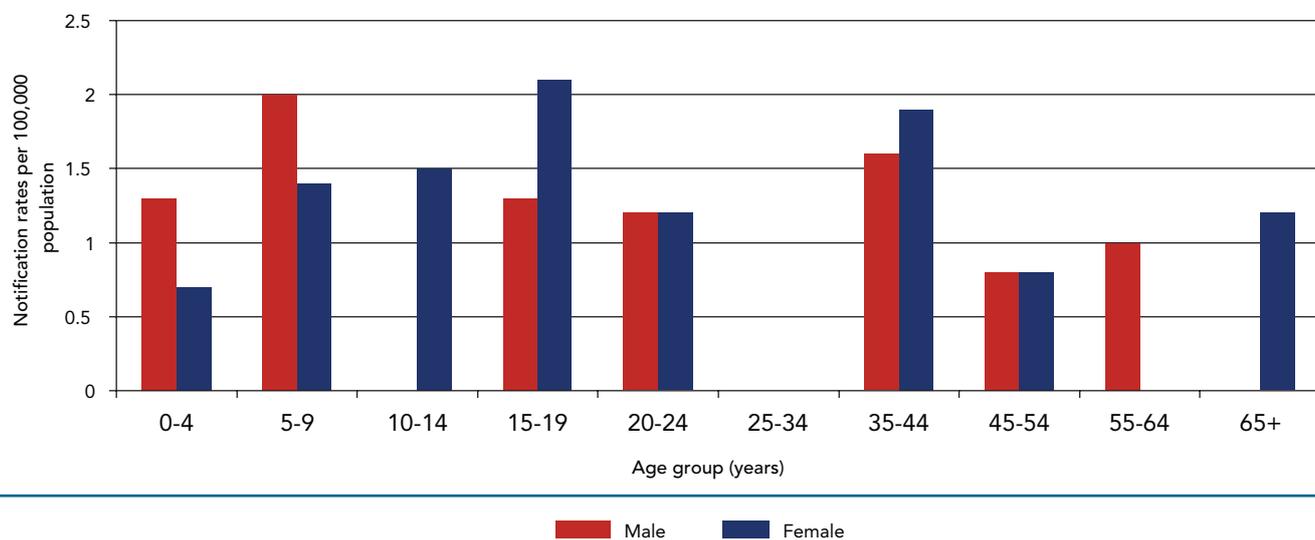


Figure 2. Age and sex-specific notification rates/100,000 population for hepatitis A, 2008