

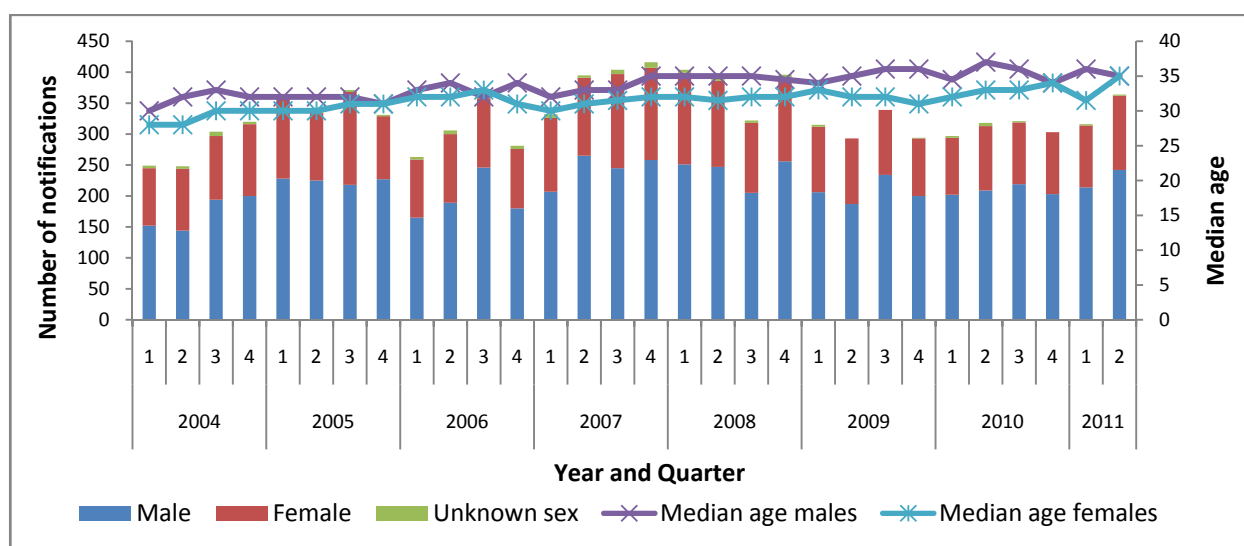
## Health Protection Surveillance Centre

### Introduction

Hepatitis C became a notifiable disease under an amendment to the Infectious Diseases Regulations 1981, implemented on 1<sup>st</sup> January 2004 (S.I 707 of 2003). Prior to this, cases of hepatitis C could be notified as “viral hepatitis type unspecified”.

### Results

There were 364 notifications of hepatitis C in quarter 2 2011. This corresponds to a crude notification rate of 8.6 per 100,000 population and is higher than the 316 cases notified in Q1.



**Figure 1.** Number of notifications of hepatitis C and median age at notification, by sex, Q1 2006 to Q2 2011

### Geographic distribution

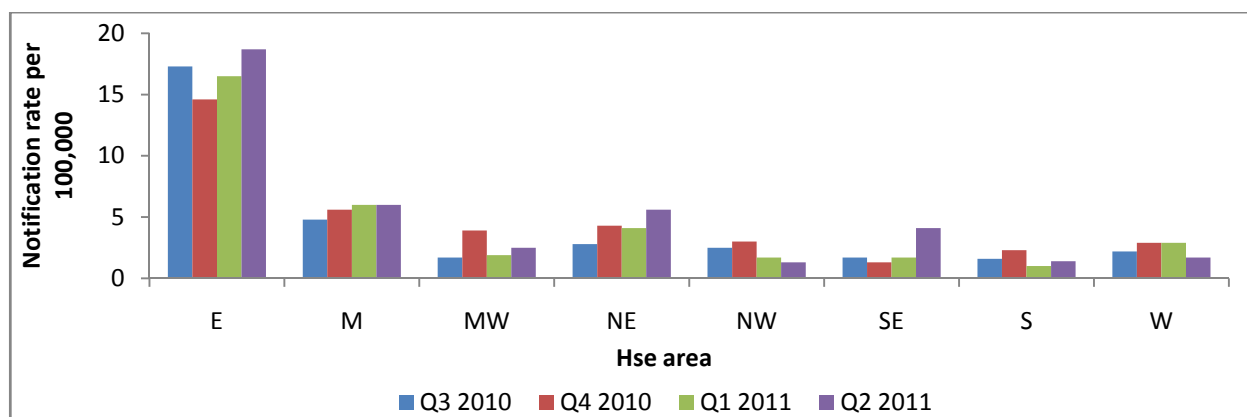
Notification rates for each HSE area for the past four quarters are shown figure 2. Rates have been highest in the HSE-East every quarter since hepatitis C became notifiable. Seventy seven percent (n=280) of Q2 cases were reported by the HSE-East in 2011. This corresponds to a notification rate of 18.7 per 100,000 population.

### Age and sex

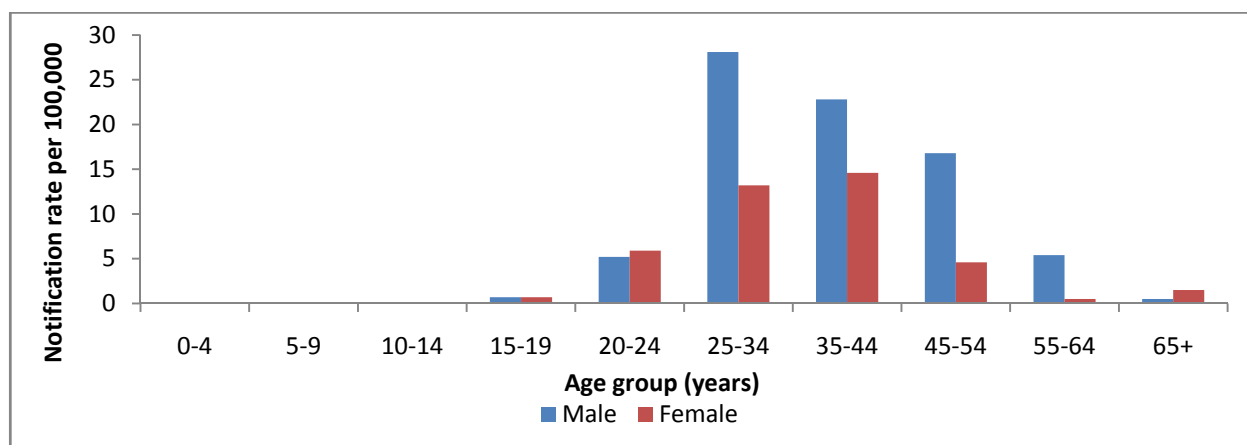
Sixty seven percent of hepatitis C cases in Q2 were male and 33% were female. The median age at notification was 35 years for both. Seventy four percent (n=268) of cases were aged between 25 and 44 years (figures 1 & 3).

### Risk factor data

Information on most likely risk factor was available for 58% (n=210) of cases in Q2. Of these, 87% (n=182) were injecting drug users. Other reported exposures or risk categories included born in an endemic country (n=13), possible sexual exposure (n=6) and receipt of blood or blood products outside of Ireland or in Ireland in the past (n=4).



**Figure 2.** Hepatitis C notification rates per 100,000 population, by HSE area, from Q3 2010 to Q2 2011



**Figure 3.** Age and sex specific rates per 100,000 population for hepatitis C notifications, Q2 2011

## Discussion

The number of notifications for the first two quarters of 2011 is higher than that for the same time period in 2010. However, quarterly notifications can fluctuate significantly and longer range data would be necessary to detect changes in trends. Notifications in 2010 (n=1239) were very similar to 2009 (n=1241) and notifications decreased by 18% in 2009 compared to 2008 (n=1516).

Demographic data and risk factors for hepatitis C infection were similar to previous quarters. Two thirds of cases were males and most cases were young to middle-aged adults. Where data were available, the predominant risk factor for infection was injecting drug use.

## Acknowledgements

HPSC would like to thank all those who provided data for this report - Departments of Public Health, laboratories and clinicians. Report by Niamh Murphy and Dr Lelia Thornton, 3<sup>rd</sup> Nov 2011.

### Case definition for hepatitis C<sup>1</sup>

*Clinical description:* In symptomatic cases, clinical picture compatible with hepatitis, i.e. discrete onset of symptoms and/or jaundice or elevated serum aminotransferase levels. Asymptomatic cases are common.

#### Laboratory criteria for diagnosis

One of the following:

- Detection of hepatitis C virus (HCV) specific antibodies
- Detection of HCV nucleic acid from clinical sample confirmed

#### Case classification

Possible: N/A

Probable: N/A

Confirmed: A case that is laboratory confirmed

1. Case definitions for notifiable diseases. Infectious Diseases (Amendment) (No. 3) Regulations 2003 (SI No. 707 of 2003). National Disease Surveillance Centre, February 2004.

**All data contained in this report are provisional (CIDR accessed 13<sup>th</sup> October 2011)**