

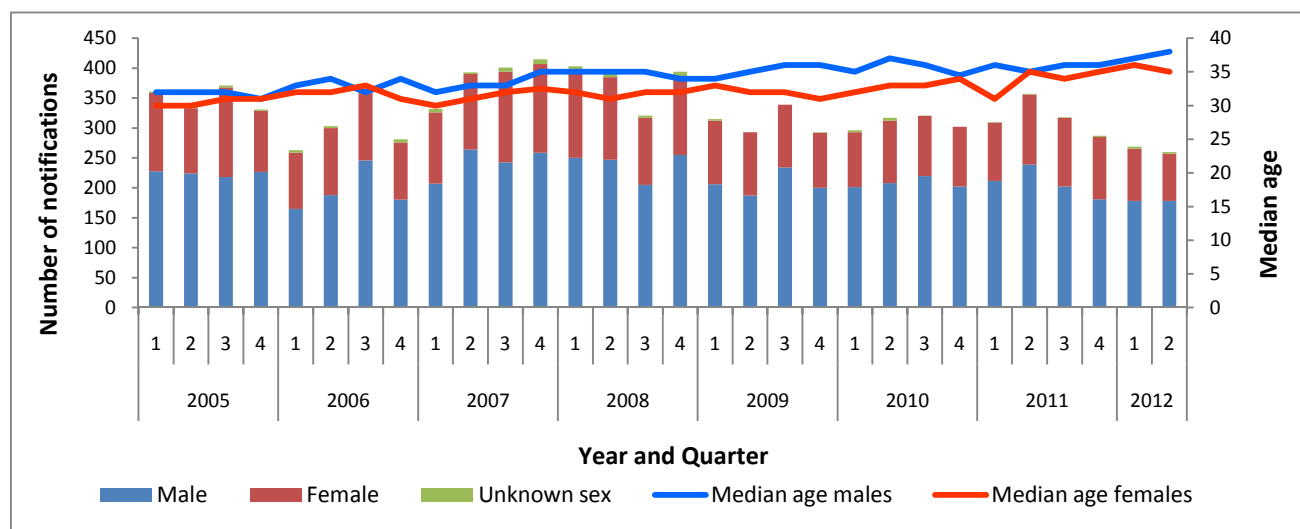
## Health Protection Surveillance Centre

### 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 260 notifications of hepatitis C in quarter 2 2012. This corresponds to a crude notification rate of 6.1 per 100,000 population and is slightly lower than quarter 1 2012 (n=269).



**Figure 1.** Number of notifications of hepatitis C and median age at notification, by sex, Q1 2005 to Q2 2012

### Geographic distribution

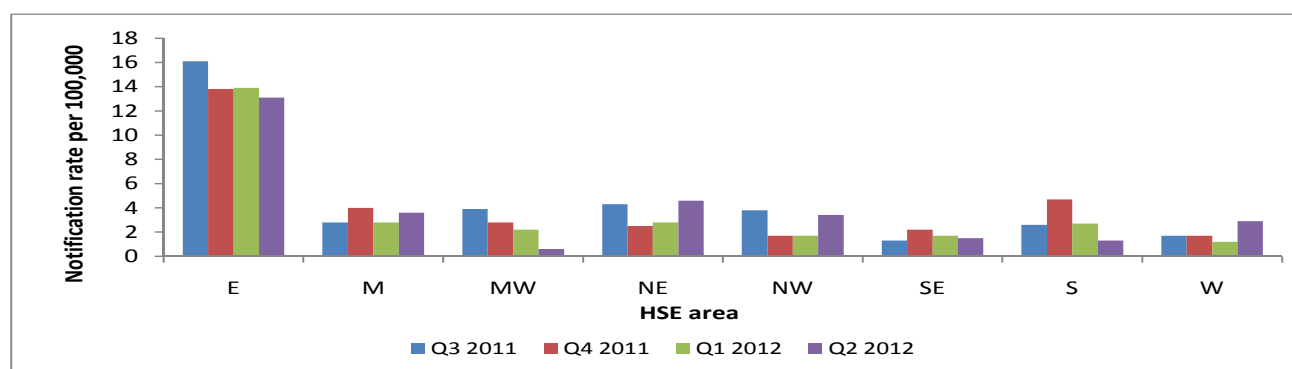
Notification rates for each HSE area for the past four quarters are shown figure 2. Rates have been highest in the HSE-East every quarter since hepatitis C became notifiable. Seventy five percent (n=196) of Q2 cases were reported by the HSE-East in 2012. This corresponds to a notification rate of 13.1 per 100,000 population.

### Age and sex

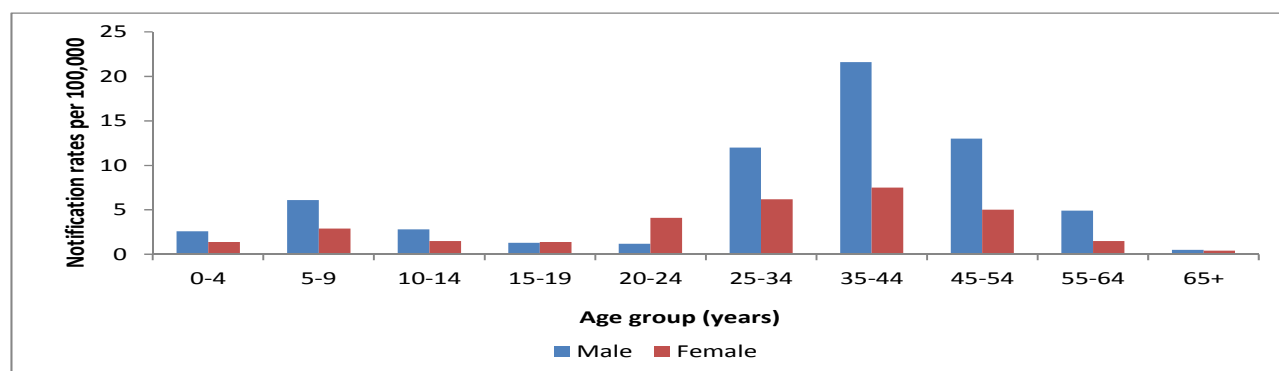
Sixty eight percent of hepatitis C cases in Q2 were male, 30% were female and sex was not known for three cases. The median age at notification was 38 years for males and 35 years for females. Sixty percent (n=157) of cases were aged between 25 and 44 years (figures 1 & 3).

### Risk factor data

There were 26 cases of hepatitis C notified during Q2 where vertical transmission was identified as the risk factor. This relatively high number represents a backlog of diagnoses of mother-to-child transmissions over a 14 year period notified for the first time in this quarter. For the remainder of Q2 cases (n=234), information on most likely risk factor was available for 60% (n=131). Eight seven percent of these were injecting drug users (n=114), 4% were born in endemic countries (n=6), 3% were likely to have been acquired sexually (n=4) and 1% were infected through blood or blood products (n=2). In all cases where data were available on those infected through blood or blood products in Ireland, infection occurred many years in the past.



**Figure 2.** Hepatitis C notification rates per 100,000 population, by HSE area, Q3 2011 to Q2 2012



**Figure 3.** Age and sex specific rates per 100,000 population for hepatitis C notifications, Q2 2012

## Discussion

The number of hepatitis C notifications in Q2 2012 (n=260) is slightly lower than those detected in Q1 2012 (n=269), and decreased by 29% compared to the same period last year (n=364). The overall numbers of hepatitis C notifications continue to be lower than the high notification rates of 2007 and 2008. However, the overall trends remain the same with males accounting for 68% of all new cases. The median age at notification for males at 38 years was slightly higher than that for females at 35 years. Where risk factor data were available, the vast majority of cases (87%) in Q2 2012 have acquired their infection through 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 Joanne Moran and Dr Lelia Thornton, 3<sup>rd</sup> October 2012.

### Case definition for hepatitis C

*Clinical criteria* Not relevant for surveillance purposes. *Epidemiological criteria* Not relevant for surveillance purposes.

#### Laboratory criteria for diagnosis

##### Hepatitis C (acute)

At least one of the following two:

- Recent HCV seroconversion (prior negative test for hepatitis C in last 12 months)
- Detection of hepatitis C virus nucleic acid (HCV RNA) or hepatitis C virus core antigen (HCV-core) in serum/plasma AND no detection of hepatitis C virus antibody (negative result)
- Detection of hepatitis C virus nucleic acid (HCV RNA)
- Detection of hepatitis C virus core antigen (HCV-core)
- Hepatitis C virus specific antibody (anti-HCV) response confirmed by a confirmatory (e.g. immunoblot) antibody test in persons older than 18 months without evidence of resolved infection\*

##### Hepatitis C (chronic)

- Detection of hepatitis C virus nucleic acid (HCV RNA) or hepatitis C core antigen (HCV-core) in serum/plasma in two samples taken at least 12 months apart

##### Hepatitis C (unknown status)

Any case which cannot be classified according to the above description of acute or chronic infection and having at least one of the following three:

#### Case classification

Possible: N/A  
Probable: N/A  
Confirmed: Any person meeting the laboratory criteria

**Note:** Resolved infection should not be notified

\*Resolved infection: Detection of hepatitis C virus antibody and no detection of hepatitis C virus nucleic acid (HCV RNA negative result) or hepatitis C virus core antigen (HCV-core negative result) in serum/plasma

All data contained in this report are provisional (CIDR accessed 20<sup>th</sup> August 2012)

HSE-Health Protection Surveillance Centre (HPSC), 25-27 Middle Gardiner St, Dublin 1, Ireland  
Tel: +353 1 8765300, Fax: +353 1 8561299, [www.hpsc.ie](http://www.hpsc.ie)