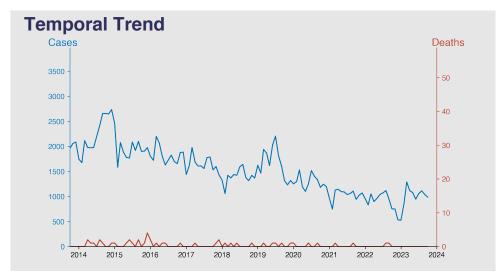
Chinese Notifiable Infectious Diseases Surveillance Report

Hepatitis A

October 2023

Introduction

Hepatitis A is a highly contagious liver infection caused by the hepatitis A virus (HAV). It is primarily spread through ingestion of contaminated food or water, or close contact with an infected person. Symptoms can range from mild to severe and include fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, and jaundice. While not typically chronic, it can cause acute liver failure, which can be fatal. Vaccination can prevent hepatitis A. Good hygiene practices, including hand washing, are also effective in stopping the spread of HAV. Most people recover with supportive care.



Highlights

A declining trend in reported cases of Hepatitis A from 2010 to October 2023, with peak numbers typically occurring in the summer months.

- Mortality has remained consistently low, with sporadic spikes, such as in May 2012, but has tapered to zero deaths reported since February 2023.
- An outlier event occurred in May 2012, with 56 deaths, suggesting a possible outbreak or reporting anomaly; otherwise, the fatality rate is minimal.
- Recent years have seen a significant reduction in cases, with 2022 recording some of the lowest figures, persisting into October 2023, indicating effective control measures may be in place.

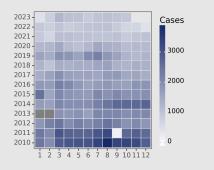
Cases Analysis

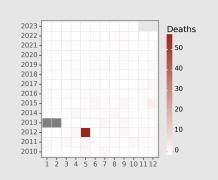
The reported cases of Hepatitis A in mainland China from January 2010 to October 2023 show a significant declining trend. Initially high in the early years, cases peaked in August 2010 at 3789. However, over the following years, a decrease can be observed, with occasional spikes. By 2023, the case numbers have notably reduced, with just 986 cases in October, demonstrating the effectiveness of public health interventions and possibly improved sanitation, vaccination efforts, and public awareness.

Deaths Analysis

The death toll associated with Hepatitis A in the given timeframe was generally low, indicating a relatively low fatality rate for the disease in mainland China. A notable outlier is May 2012, with an abrupt rise to 56 deaths. This spike could suggest an outbreak with a particularly virulent strain or issues in healthcare access. The subsequent years have seen minimal fatalities, often zero, which might be attributed to better clinical management of cases and widespread vaccination, contributing to the reduced severity of the disease's impact.

Distribution





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