

Chinese Notifiable Infectious Diseases Surveillance Report

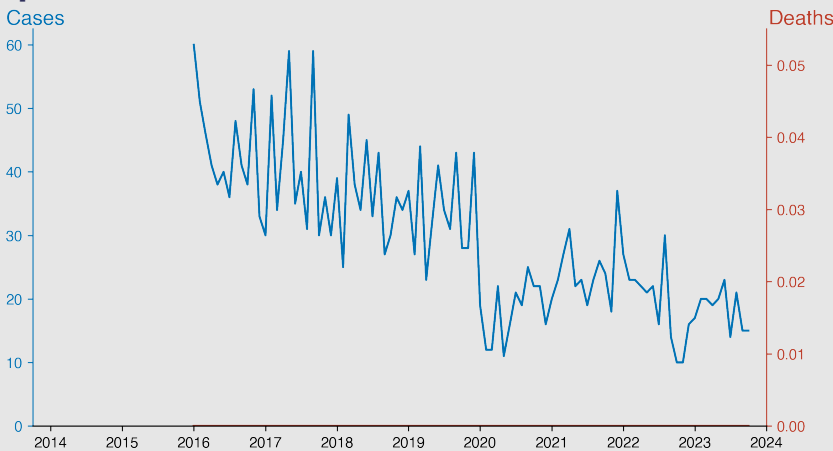
Hepatitis D

October 2023

Introduction

Hepatitis D, also known as delta hepatitis, is a liver infection caused by the hepatitis D virus (HDV), which is an incomplete virus that requires the presence of the hepatitis B virus (HBV) to replicate. HDV is transmitted through contact with infectious blood, percutaneous and mucosal exposure to infected body fluids, and can occur as either a co-infection with HBV or a superinfection in those already chronically infected with HBV. Chronic HDV infection can lead to more severe liver disease compared to HBV alone, including cirrhosis and hepatic decompensation.

Temporal Trend



Highlights

There is a decreasing trend in the number of Hepatitis D cases from a peak in 2016 and 2017, stabilizing at low numbers by 2023.

- No reported deaths, indicating either non-lethal Hepatitis D infections or effective management and treatment of cases.
- Cases fluctuate seasonally with some peaks but maintain a downward or stable trend from 2020 to 2023.
- The current situation as of October 2023 shows a modest number of cases (15) without any fatalities, suggesting controlled transmission of Hepatitis D in mainland China.

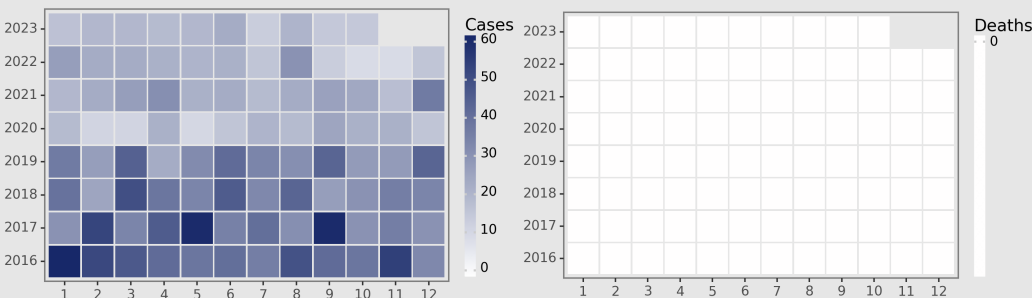
Cases Analysis

From 2016 to 2023, the reported Hepatitis D cases in mainland China fluctuated without a clear trend, averaging approximately 32 cases per month. The highest monthly count was reported in May 2017 with 59 cases, whereas the lowest occurred in October and November 2022, each with 10 cases. A notable reduction in the number of cases began in 2020, potentially due to augmented public health measures amidst the COVID-19 pandemic. The data suggest periodic increases that may align with seasonal or episodic factors, but a comprehensive epidemiological investigation would be required to determine specific causes.

Deaths Analysis

The mortality data for Hepatitis D from 2016 to 2023 show no reported deaths in mainland China, which indicates either a non-lethal nature of the cases or high efficacy of treatment protocols. This absence of fatalities could also be a result of underreporting or successful containment and management of disease progression among those infected. However, the lack of fatalities should be interpreted with caution, as it may not reflect the broader global context of Hepatitis D, where co-infection with Hepatitis B virus can result in more severe outcomes. Ongoing surveillance and preventive strategies remain crucial in maintaining these outcomes.

Distribution



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