

Chinese Notifiable Infectious Diseases Surveillance Report

Hepatitis D

February 2024

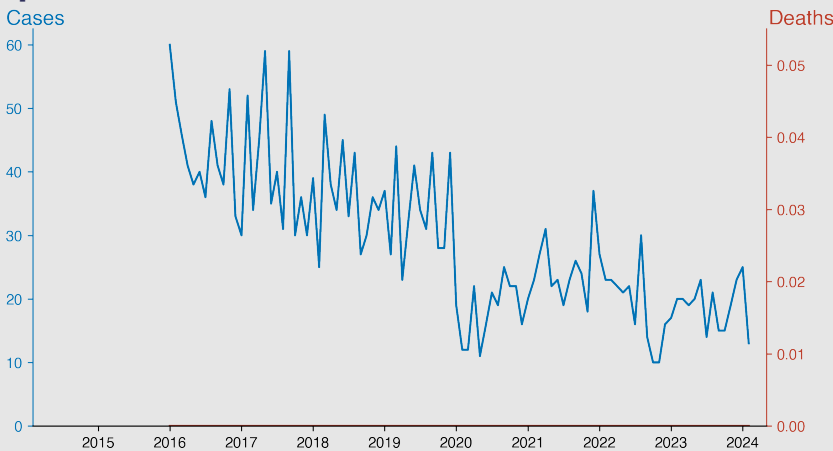
Introduction

Hepatitis D, also known as delta hepatitis, is a liver infection caused by the Hepatitis D virus (HDV) that only occurs in individuals who are simultaneously infected with Hepatitis B virus (HBV). HDV is transmitted through blood-to-blood contact, unprotected sex, and from infected mothers to their newborns. It is known to accelerate the progression to liver cirrhosis and hepatocellular carcinoma in co-infected individuals. Although the global incidence of HDV infection has declined due to HBV vaccination, it remains a concern, particularly in regions with high HBV prevalence.

Highlights

- Noticeable decline in Hepatitis D cases in mainland China observed from 2016-2024, with case counts dropping from 60 to 13 per month.
- Data trend suggests effective disease management practices are being employed.
- Zero mortality from Hepatitis D reported across the eight-year period, implying successful treatment strategies or low disease severity.
- As of February 2024, Hepatitis D is well-controlled in China with low case numbers and no reported deaths.

Temporal Trend



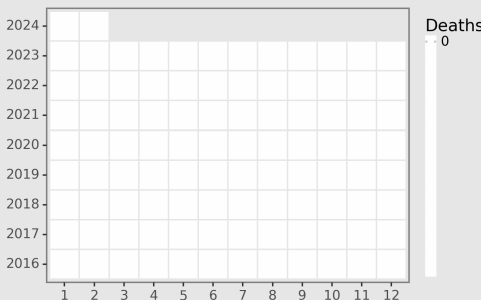
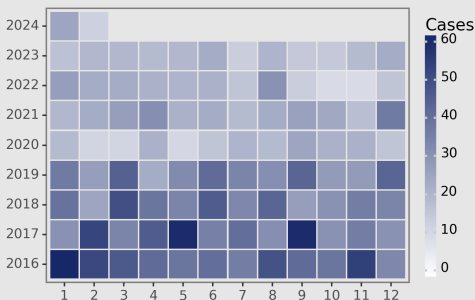
Cases Analysis

Over an 8-year span, Hepatitis D cases in Chinese mainland showed a declining trend with initial monthly cases ranging from 33 to 60 in 2016 to a slight reduction averaging approximately 20 cases by 2024. Notably, there was a significant drop in reported cases in 2020, possibly reflecting the impact of COVID-19 on healthcare access and reporting. The cyclical pattern suggests seasonal variation with higher counts often noticed in the first and last quarters of each year. Despite fluctuations, there is no clear upward trajectory, indicating successful containment or underreporting.

Deaths Analysis

Throughout the data span from 2016 to 2024, there were no reported deaths due to Hepatitis D in the Chinese mainland. This consistent zero fatality rate implies either an effective healthcare response to manage the disease, successful prevention measures, high treatment efficacy, or underreporting of fatal cases. With no mortalities over an 8-year period, the data presents an optimistic scenario for Hepatitis D outcomes in the region. However, without mortality data, it's difficult to infer the true impact of Hepatitis D's severity and fatality within the population.

Distribution



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