

Chinese Notifiable Infectious Diseases Surveillance Project

Hepatitis D

November 2023

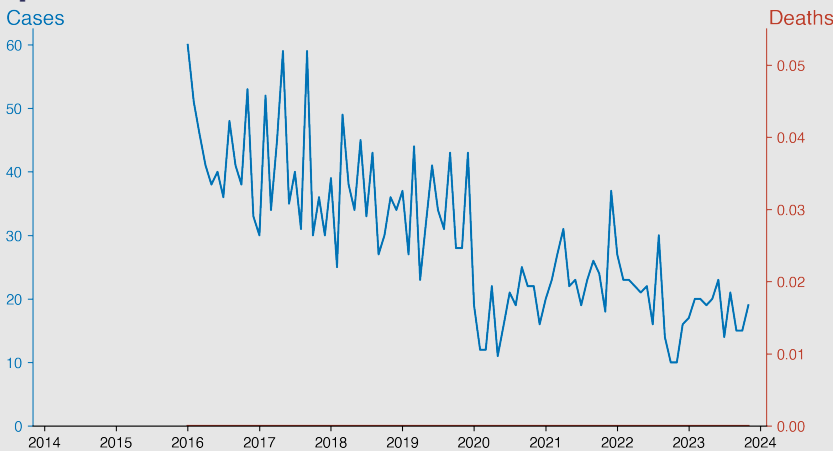
Introduction

Hepatitis D, also known as Delta Hepatitis, is a severe liver disease caused by the Hepatitis D virus (HDV). It only develops in individuals already infected with Hepatitis B as it needs the Hepatitis B surface antigen to survive. It can be contracted through direct contact with infected blood, unprotected sex, or from an infected mother to her baby during childbirth. HDV can lead to conditions like cirrhosis, liver failure, and liver cancer. It's the least common but the most severe type of viral hepatitis.

Highlights

- A steady decline in Hepatitis D cases in Mainland China from around 60 cases per month in 2016 to 10-20 cases per month by 2022-2023.
- No reported deaths from Hepatitis D during the observed period, indicating effective management or lower disease severity.
- The incidence rate appears to have stabilized since 2020, with minimal fluctuations but no significant outbreaks noted.
- Ongoing monitoring and prevention efforts remain essential to control and further reduce incidences of the disease.

Temporal Trend



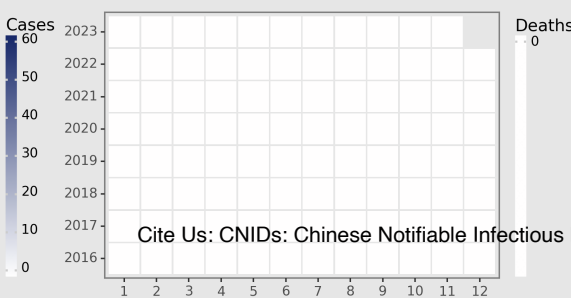
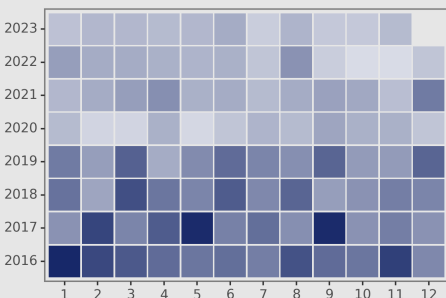
Cases Analysis

The data indicates a decreasing trend in Hepatitis D cases from 2016 to 2023 in the Chinese mainland, with an initial range of 33-60 cases per month to 10-23 cases in the most recent year. The highest number of monthly cases was observed in May 2017, with 59 cases, while the lowest was in October and November 2022, with 10 cases each. A notable dip occurs from 2020 onwards, potentially indicating improved public health interventions, increased awareness, or underreporting due to competing health challenges like the COVID-19 pandemic.

Deaths Analysis

Throughout the reported period from 2016 to 2023, there have been zero deaths attributed to Hepatitis D in the Chinese mainland, suggesting that while the disease incidence has fluctuated, the fatality rate has remained at zero or that the fatality cases have not been captured in the reported data. This consistent lack of mortality could be attributed to effective clinical management of cases and comprehensive surveillance systems, although the absence of death data warrants cautious interpretation.

Distribution



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