

Chinese Notifiable Infectious Diseases Surveillance Project

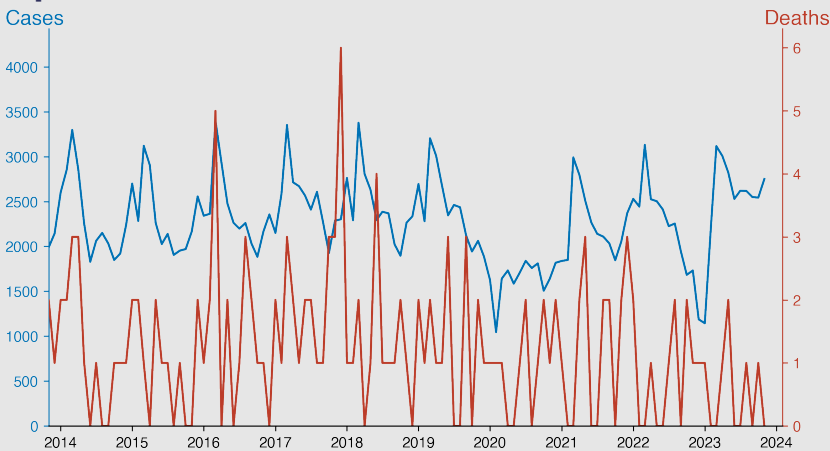
Hepatitis E

November 2023

Introduction

Hepatitis E is a viral disease that specifically affects the liver, primarily transmitted through the fecal-oral route owing to fecal contamination of drinking water. It is commonly prevalent in developing countries with poor sanitation and hygiene standards. Symptoms include jaundice, fatigue, stomach pain or nausea. Most people recover fully from the disease, however, it can be serious or even fatal for pregnant women or individuals with pre-existing chronic liver disease. Unlike other types of viral hepatitis, there is currently no available vaccine for Hepatitis E approved globally.

Temporal Trend



Highlights

- Seasonal peaks of Hepatitis E in China occur in spring, with a declining trend in cases over the years, 4262 cases in March 2011 to 2751 in November 2023.
- Mortality rates are consistently low despite varying case numbers, with occasional peaks (maximum 6 deaths) but often zero to few deaths monthly.
- The overall decline in cases alongside low fatality suggests successful disease control measures, though there are critical data gaps (e.g., missing months in 2011) that need addressing for accurate tracking.

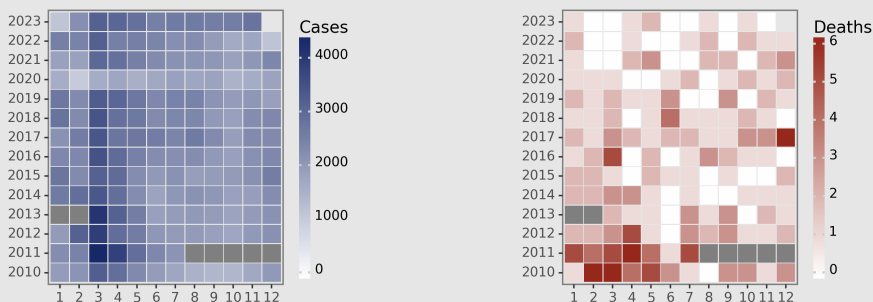
Cases Analysis

From 2010 to 2023, there was variability in reported Hepatitis E cases in mainland China. Early years show peaks in March and April, with cases occasionally exceeding 3,000. The year 2011 witnessed the highest March figure at 4,262 cases. A declining trend is observed beginning in 2018, with a notable reduction in 2020 that may be due to COVID-19-related factors, though cases pick up somewhat thereafter. While some months lack data, there seems to be seasonality, with spring months generally having more cases.

Deaths Analysis

Hepatitis E-related fatalities remained low from 2010 to 2023, with deaths per month seldom exceeding three. The highest recorded death toll in a single month was six, occurring in 2010 February, 2011 April, and 2017 December. As case numbers reduced in 2020, there was no corresponding drop in mortality, suggesting potential underreporting or changing patterns of virulence or health care access. The mortality rate is inconsistent and does not appear to correlate strongly with the number of cases, implying the influence of other factors on disease outcome.

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