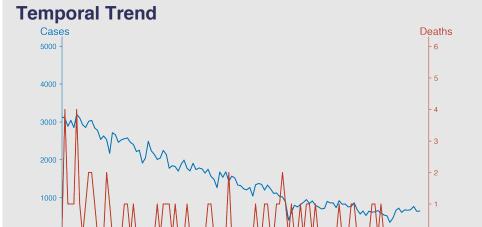
Chinese Notifiable Infectious Diseases Surveillance Report

Other hepatitis

October 2023

Introduction

Other hepatitis refers to the various, less common forms of liver inflammation not caused by the primary hepatitis viruses A, B, C, D, and E. These can result from infections by other pathogens, toxic substances, alcohol abuse, autoimmune diseases, or medications. Symptoms often mirror those of viral hepatitis, including jaundice, fatigue, and abdominal pain. Diagnosis is based on a combination of clinical evaluation, liver function tests, and sometimes more specific testing to identify the underlying cause. Treatment varies depending on the etiology and can range from medication to lifestyle changes or supportive care.



Highlights

Significant decrease in reported cases of other hepatitis from 2010 (3723 cases in January) to 2023 (644 cases in October).

- Mortality associated with other hepatitis has remained low, with many months reporting zero deaths in recent years, indicating potentially effective management strategies since 2010.
- No mortality reported since February 2023 up to the current data point in October 2023, which suggests an improvement in disease outcomes or reporting accuracy.
- The overall trend indicates a reduction in both incidence and mortality rates for other hepatitis in mainland China over the 13-year span.

Cases Analysis

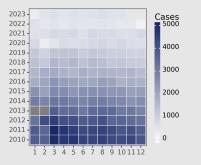
From 2010 to 2023, reported cases of Other hepatitis in mainland China demonstrated a decline from 3723 cases in January 2010 to 644 cases in October 2023. A noticeable drop occurred in February 2020, possibly due to health resource allocation amid the COVID-19 pandemic and associated control measures such as lockdowns. Seasonal variations appear minimal, suggesting a stable transmission pattern across seasons. The consistent downtrend suggests potential improvements in public health interventions, vaccination, and hygiene practices.

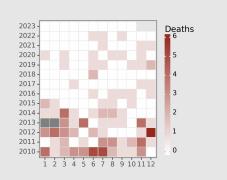
Deaths Analysis

2024

Over the same period, deaths associated with Other hepatitis in mainland China have remained low, with a peak of 6 deaths in December 2012. Following this peak, mortality rates have generally decreased or remained stable at zero to one deaths per month, despite fluctuating case numbers. The highest mortality was observed in the early years (2010–2012), with a subsequent reduction likely due to enhanced health care interventions, disease awareness, and possibly improved reporting accuracy. The mortality data supports the conclusion of effective management of hepatitis in China.

Distribution





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