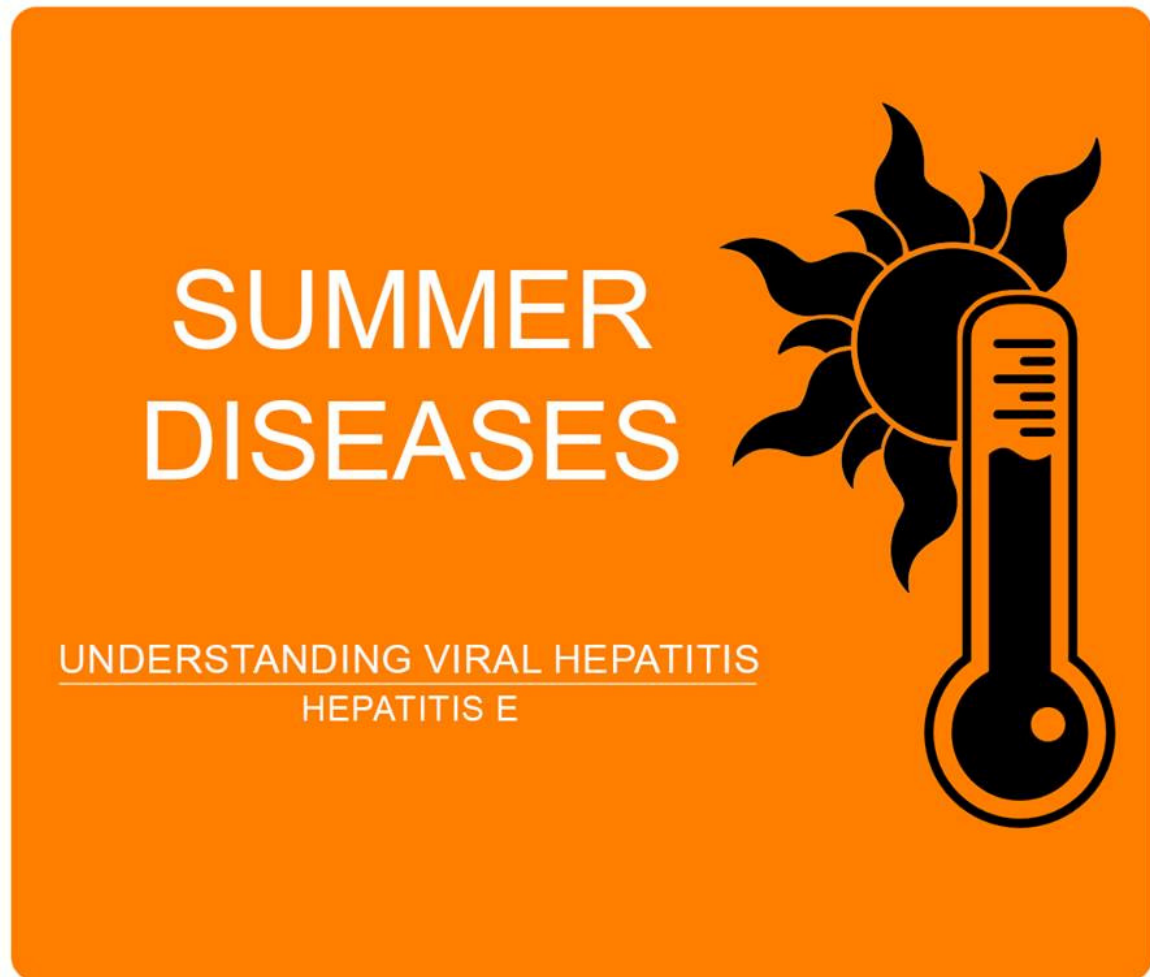


Understanding Viral Hepatitis E



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Key Facts

- Hepatitis E is a liver disease caused by infection with a virus known as hepatitis E virus (HEV).

- Every year, there are an estimated 20 million HEV infections worldwide, leading to an estimated 3.3 million symptomatic cases of hepatitis E (1).
- WHO estimates that hepatitis E caused approximately 44 000 deaths in 2015 (accounting for 3.3% of the mortality due to viral hepatitis).
- The virus is transmitted via the faecal-oral route, principally via contaminated water.
- Hepatitis E is found worldwide, but the prevalence is highest in East and South Asia.
- A vaccine to prevent hepatitis E virus infection has been developed and is licensed in China, but is not yet available elsewhere.

Typical signs and symptoms of Hepatitis include:

- An initial phase of mild fever, reduced appetite (anorexia), nausea and vomiting, lasting for a few days; some persons may also have abdominal pain, itching (without skin lesions), skin rash, or joint pain.
- Jaundice (yellow discolouration of the skin and sclera of the eyes), with dark urine and pale stools; and
- Slightly enlarged, tender liver (hepatomegaly).

How is Hepatitis E spread?

Hepatitis E is spread through food or water contaminated by faeces from an infected person.

Who is at risk for Hepatitis E?

People most likely to be exposed to the hepatitis E virus are

- International travellers, particularly those traveling to developing countries
- People living in areas where hepatitis E outbreaks are common
- Exchange of body fluids with an infected person

How can hepatitis E be prevented?

The only way to prevent the disease is to reduce the risk of exposure to the virus. Reducing risk of exposure means avoiding tap water when traveling internationally and practicing good hygiene and sanitation.

Treatment

There is no specific treatment capable of altering the course of acute hepatitis E. As the disease is usually self-limiting, hospitalization is generally not required. Hospitalization is required for people with fulminant hepatitis, however, and should also be considered for symptomatic pregnant women.

Immunosuppressed people with chronic hepatitis E benefit from specific treatment using ribavirin, an antiviral drug. In some specific situations, interferon has also been used successfully.