Hepatitis in Middle East

HCV prevalence in Hodgkin and non-Hodgkin lymphoma cases

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Necati YENİCE, Fatih GÜLLÜK, Nurten ARICAN, Sembol TÜRKMEN

Background/aims: In this study we aimed to investigate the relation between hepatitis C virus (HCV) and B cell lymphoproliferative diseases. Methods: Eighty-four patients with B-cell non-Hodgkin lymphoma and 50 patients with Hodgkin lymphoma were included. Control group consisted of another 100 otherwise healthy blood donors who had no previous history of invasive surgery, blood transfusions, and viral hepatitis. HCV positivity was investigated in both case groups and control group. Results: Anti-HCV positivity was significantly more frequent in B-cell non-Hodgkin lymphoma patients compared to control group (7.1% vs. 1%, p<0.05). In Hodgkin lymphoma patients however, frequency was comparable with the control group (2% vs. 1%, p<0.05). Conclusions: These findings suggest that HCV may play a role in the development of B-cell non-Hodgkin lymphoma, but not in Hodgkin lymphoma.

Risk of perinatal transmission of hepatitis B virus in Jordan

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Batayneh N, Bdour S

OBJECTIVES: To determine the risk of perinatal transmission of hepatitis B virus (HBV) in Jordan. METHODS: Plasma samples from 1000 pregnant Jordanian women were screened by ELISA for HBV markers (HBsAg, HBeAg, anti-HBe, anti-HBc and anti-HBs). RESULTS: HBsAg and HBeAg were detected in 4.3% and 0.1% of the pregnant women, respectively. The overall prevalence of antibodies was 6%, 11.1% and 7.5% for anti-HBe, anti-HBc and anti-HBs, respectively. Women were assigned to four groups according to the serological patterns of HBV markers: susceptible (85.9%), with acute infection (2.9%), with chronic infection (1.4%) and previously infected (9.8%). Most women were at the third trimester of pregnancy, therefore women with acute and chronic hepatitis at this gestational age were at risk of transmitting HBV infection to their newborns. Women who belonged to the low socio-economic class were at higher risk of HBV infection. CONCLUSIONS: Based on the results, we recommend screening women for HBV during pregnancy in order to identify HBV carriers. All newborns born to carriers should be vaccinated immediately after birth, both passively and actively. Also vaccination of HBV seronegative pregnant women is recommended.

Sero-epidemiology of hepatitis B infection in an urban paediatric population in Turkey

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V. Ertekin, M.A. Selimog¢lu, S. Altýnkaynak

Summary: The hepatitis B virus (HBV) seroprevalence rate is known to be 25–60% in Turkey with the highest prevalence in the east and south-east. There are insufficient data on sero-epidemiology of HBV infection in children living in East Turkey. The objective of this study was to estimate the seroprevalence of HBV infection in 6–17 year olds living in the largest city in East Turkey, and to correlate the serological results with epidemiological data. A total of 1091 serum samples were tested for hepatitis B surface antigen (HBsAg), antibody to HBsAg (anti-HBs) and antibody to hepatitis B core antigen (anti-HBc) using a commercially available enzyme-linked immunosorbent assay. The overall seroprevalence rate was 9.7% and was correlated with age $\delta P \ 4 \ 0.011P$: No statistical difference was detected between subjects with or without risk factors $\delta P \ 4 \ 0.077P$: The seroprevalence of HBsAg was 1.8%, and it was higher in children with a low socio-economic status $\delta P \ 4 \ 0.047P$: The educational status of the parents and sibling size did not affect the rate of total seroprevalence or HBsAg seroprevalence. Although we found that the HBV seroprevalence rate in East Turkey was not as high as reported previously, we emphasize the importance of screening children in order to identify asymptomatic patients in Turkey until HBV infection is entirely eradicated with vaccination programmes.