EPI-NEWS NATIONAL SURVEILLANCE OF COMMUNICABLE DISEASES

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In the year 2000, 81 patients were notified with hepatitis A, 49 men and 32 women. This represents the same low level as in previous years, EPI-NEWS 9/99 and 18/00. The age distribution is shown in Table 1.

Table 1. Notified cases of hepatitis A in Danes and immigrants, by age, with overall incidence per 10⁵, 2000

	Da-	Immi-		Inci-
Age	nes	grants	Total	dence
0-9	16	18	34	0.5
10-19	3	5	8	1.4
20-29	9	2	11	1.5
30-39	11	0	11	1.3
40-49	9	0	9	1.2
50-59	4	1	5	0.7
60+	3	0	3	0.3
Total	55	26	81	1.5

As before, the incidence was highest in the under-10-year age group. Of the 34 children aged 0-9 years, 22 were 5 or under 5 years old, comprising 10 Danes and 12 immigrants. The incidence per 10⁵ was 1.1 for Danes and 6.9 for immigrants. 37 patients (40%) were admitted to hospital in connection with hepatitis A infection; 25 were Danes, seven of whom were aged 15 years or less. Of the 12 immigrants admitted to hospital 11 were under 15 years. The incidence was highest in the Municipality of Copenhagen and Roskilde County, Table 2.

Table 2. Notified cases of hepatitis A, by county, with incidence per 10⁵, 2000, 1999 in ()

10,2000.19991	п ()		
		<u>Inci</u>	<u>dence</u>
County	No.	2000	(1999)
Cph. Municip.	22	4.4	(3.1)
Frb. Municip.	1	1.1	(2.2)
Cph. County	9	1.5	(3.1)
Frederiksborg	6	1.6	(3.3)
Roskilde	8	3.5	(3.0)
West Zealand	6	2,0	(2.7)
Storstrøm	3	1.2	(0.0)
Bornholm	0	0,0	(2.2)
Funen	5	1.1	(8.0)
South Jutland	3	1.2	(1.2)
Ribe	3	1.3	(0.4)
Vejle	1	0.3	(0.6)
Ringkøbing	2	0.7	(2.2)
Aarhus	5	8.0	(0.9)
Viborg	1	0.4	(0.0)
North Jutland	6	1.2	(8.0)
Total	81	1.5	(1.7)

Mode of infection

In 41 cases (51%) the infection was aguired in Denmark; the mode of infection was unknown in 18 of these, Table 3. Of the 55 Danish pa-

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tients, 22 were infected abroad, in 15 different countries. Of the 26 immigrant patients, 18 were infected abroad, in seven different countries, six in Morocco and five in Turkey. In the 0-19-year age group, three of 19 Danes and 17 of 23 immigrants were infected abroad. Eight persons were notified with presumed occupational infection in 2000; three were employed at day-care and two at special care institutions, one worked at an asylum centre, one as a tour leader and one as a plummer.

Table 3. Notified cases of hepatitis A by presumed mode of infection, 2000

	No.	%
Infected abroad	40	49
Member of household	8	10
Child at institution	10	12
Adopted child	2	2
Other personal contact	3	4
Unknown	18	22
Total	81	100

Vaccination status was reported for 27 patients, comprising 22 Danes (nine children below nine years of age) and five immigrant children, all under nine years. None had been vaccinated, but one had been given gammaglobulin in connection with a sister's infection.

Case clusters

Six family and seven institutional outbreaks were recorded, each category affecting a total of 14 persons. Three of the family outbreaks and two of the institutional outbreaks could be attributed with certainty to primary infection abroad.

Comments

The number of notified hepatitis A cases remains low. The proportion of immigrants was 32% in 2000, nearly half that in 1999 (56%). Hepatitis A in immigrants is still most frequent in children and adolescents. Vaccination or passive immunization of immigrant children is therefore still relevant before visits to their home country or other countries in which the risk of hepatitis A viral infection is

(A. H. Christiansen, M. S. Nielsen, Dept. of Epidemiology)

THIMEROSAL IN VACCINES

The presence of thimerosal (also called thiomersal or merthiolate) in influenza vaccines has been mentioNo. 45, 2001

ned in the press. Thimerosal is an organic mercury compound used as a preservative or may occur in trace amounts as a residue from the production process for some inactivated vaccines. In Denmark, thimerosal has not been used in vaccines for children since 1992. Overseas vaccine manufacturers are working on eliminating the compound, which is still used in certain vaccines, including influenza vaccines. Thimerosal may produce allergic reactions, usually in the form of contact dermatitis. Such reactions can be avoided by giving the vaccine intramuscularly, EPI-NEWS 39/01. Mercury is regarded as neurotoxic to the developing brain. Children could previously get a cumulative dose due to the thimerosal content of many children's vaccines. Statens Serum Institut has issued two influenza vaccines containing thimerosal this year. Both have been approved by the Danish Medicines Agency for the vaccination of both children and adults. However, it has also been possible to obtain a small amount of thimerosal-free vaccine, principally intended for children belonging to risk groups, EPI-NEWS 39/01.

Some fish may contain mercury compounds in greater amounts than those found in vaccines.

(A.-M. Plesner, Dept. of Medicine)

PILGRIMAGES TO MECCA

Saudi-Arabian health authorities have previously required vaccination against meningococcal disease due to groups A+C before entry during the pilgrimage season. In spring 2000 an epidemic of group W135 infection broke out, repeated this spring, when there was also a Danish case, EPI-NEWS 17/00 + 18/01. The authorities are therefore now requiring vaccination with the tetravalent polysaccharide vaccine against groups A+C+W135+Y.

All travellers over two years of age, including those vaccinated against groups A+C within the last three years, must be vaccinated once with the tetravalent vaccine at least 10 days before entry. Children aged 3-24 months must have two doses at an interval of three months, although only protection against group A is to be expected.

(S. Samuelsson, Dept. of Epidemiol.)

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Patients with diagnosed infections from streptococci isolated from blood and CSF

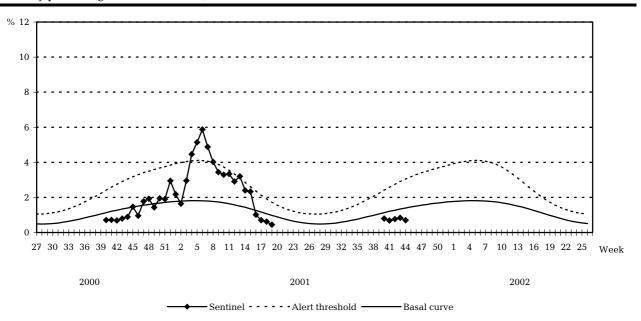
3rd quarter of 2001 compared with the same period of the two previous years

		3rd quarter 2001			3rd quarter		
		< 2 yrs	2-59 yrs	60 yrs +	Total	1999	2000
July	S. pneumoniae	1	13	29	43	34	42
	Gr. A strep.	-	6	7	13	5	6
	Gr. C strep.	-	-	3	3	2	2
	Gr. G strep.	-	2	8	10	7	4
August	S. pneumoniae	2	14	12	28	22	38
	Gr. A strep.	-	2	3	5	8	5
	Gr. C strep.	-	-	1	1	3	2
	Gr. G strep.	-	4	6	10	11	6
September	S. pneumoniae	7	12	30	49	38	48
	Gr. A strep.	1	-	1	2	3	4
	Gr. C strep.	-	-	-	-	3	3
	Gr. G strep.	-	9	6	15	7	12
3rd quarter	S. pneumoniae	10	39	71	120	94	128
	Gr. A strep.	1	8	11	20	16	15
	Gr. C strep.	-	-	4	4	8	7
	Gr. G strep.	-	15	20	35	25	22

(Streptococcus Unit)

Sentinel surveillance of influenza activity

Weekly percentage of consultations, 2000/2001/2002



Sentinel: Influenza consultations as % of total consultations

Basal curve: Expected frequency of influenza consultations under non-epidemic conditions

Alert threshold: Possible incipient epidemic