NON-B, NON-C HEPATITIS - P-K7

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HAV EPIDEMICS AMONG MSM : HIGH PREVALENCE OF HIV INFECTED PATIENTS

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Background

Transmission of HAV is mainly via faecal-oral route, including direct person-to-person contact. The population of men who have sex with men (MSM) whose sexual practices favors the fecal-oral transmission of the virus, is highly at risk of HAV infection. **Since mid-2016, many European countries observed a growing number of hepatitis A infections among MSM**. In December 2016, the European Center for Disease Control and Prevention (ECDC) reported the circulation of two strains of HAV genotype IA which resulted in the emergence of several epidemic foci in various European countries including the United Kingdom, Germany and the Netherlands. At the same date, we observed the first cases in Normandy, France, where the epidemic started in the country.

Methods

Risk factors, behavioural and biological data (including co-infections) collected for each HAV+ patient hospitalised in the Rouen University Hospital were analysed. A phylogenetic analysis of the amplified HAV positive strains was operated by the French National Reference Center for HAV, and compared to the actual European data.

Results

From december 2016 to december 2017, 51 patients (Sex ratio M/F=24.5) admitted to the Rouen University Hospital with confirmed HAV infection. Among them, 6 were outpatients , and the remaining 45 others were inpatients hospitalised in our hospital. **A majority of the patients (n=31; 60.8%) described themselves as MSM**. All of them were infected with either [IA (VRD 521 2016)], or [IA (RIVM HAV16-090)] HAV strains which are two of the epidemic strains that circulates in Europe since 2016 in the MSM community. **Forty two percent of these infected MSM (n=13/31) were also infected with HIV**, most of them treated by HAART.

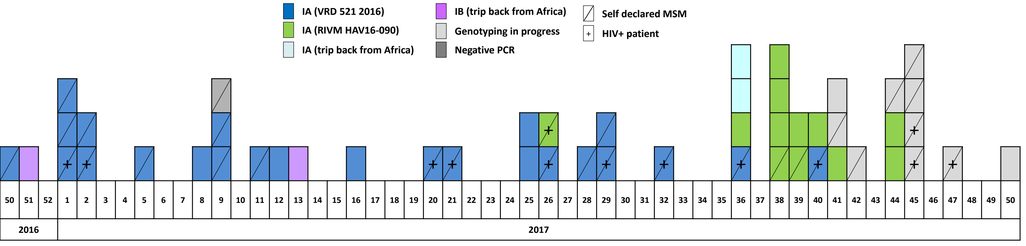

Figure 1 : Weekly report of HAV infection in Rouen University Hospital

	Inpatients hospitalized in the emergency department	Inpatients hospitalised in hepatology or infectious disease department	Inpatients hopitalized in intensive care unit	Number of patients transfered to a liver transplant unit
	40 (3 repeated visits)	25	9	2 (but finally not transplanted)
Total days of hospitalization :	47	48	29	

Figure 2: Hospitalization data

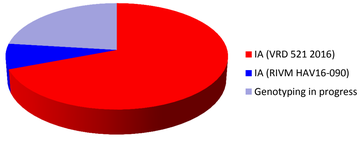

Figure 3 : HAV strains circulating among HIV+

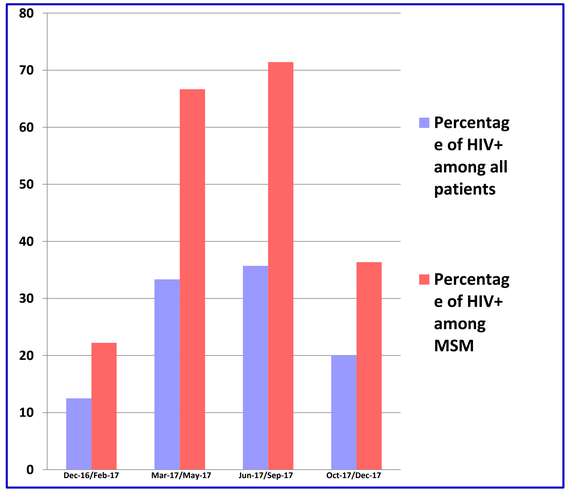

Figure 2 : Frequency of HIV/HAV co-infection

Conclusion

Sexual transmission is becoming the main route of transmission of hepatitis A in countries where the infrastructure reduce the risk of faecal contamination through the environment. Sexual behaviours must be included systematically when questioning about the origin of HAV epidemics. Regarding the high number of HIV+ among patients hospitalized with HAV infection, systematic screening for HBV, HCV and HIV should be proposed. Vaccination and control of the seropositivity against HAV should be systematically proposed among HIV MSM.

- **We report a high proportion of HIV+ patients among the patients hospitalised with an acute HAV infection**
- **HAV vaccination must be systematically offered during the follow –up of HIV+ patients to prevent the potentially severe infection**