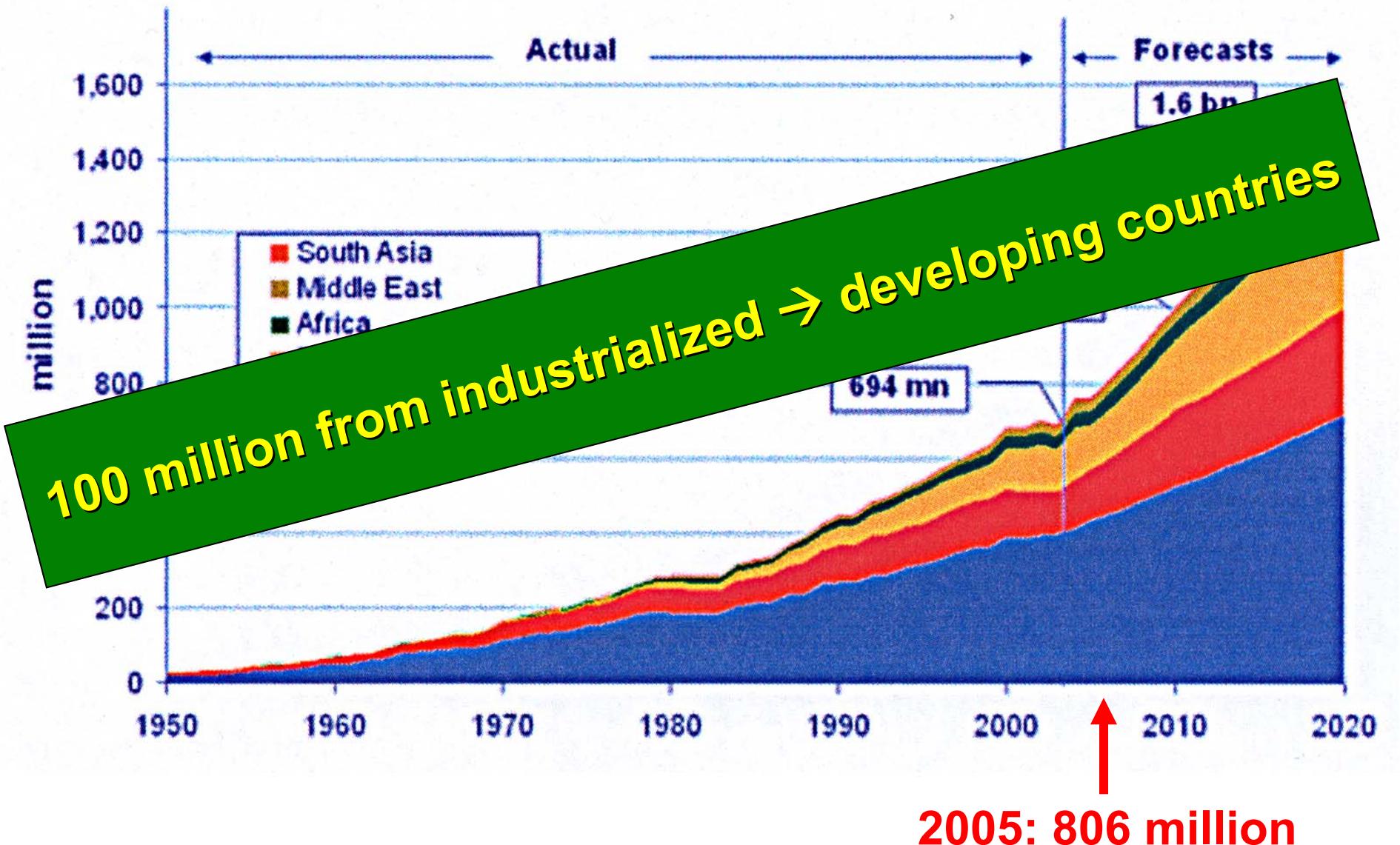


# Hepatitis A prevention in travelers

- Global travel market trends
- Current risk in „developing“ countries
- Anti-HAV seroprevalence in middle-income economics
- WHO hepatitis A prevention strategy in travelers
- Compliance with recommendations
- Exposure to hepatitis A risks
- Conclusions – new strategy needed ?!

# International Tourist Arrivals, 1950-2020

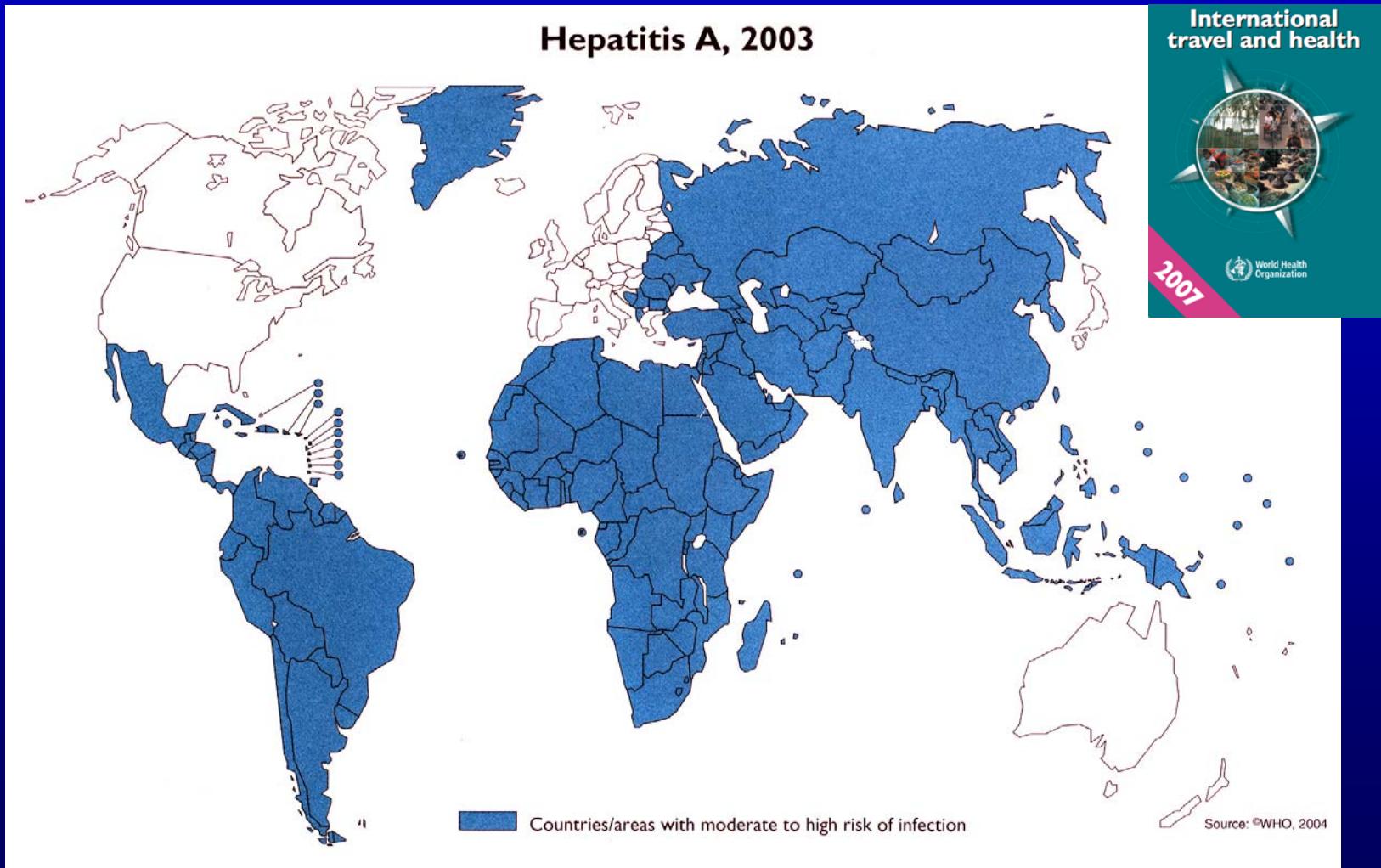


Source: World Tourism Organization (WTO)

# Travel market forecasts – Annual growth rate 1995 - 2020

Region	Market Share		Average %
	1995	2020	
World	100.0	100.0	4.1
Europe	59.8	45.9	3.1
Americas	19.3	18.1	3.8
Africa	3.6	5.0	5.5
South Asia	0.7	1.2	6.2
E Asia/Pacific	14.4	25.4	6.5
Middle East	2.2	4.4	6.7

# WHO Map of HAV Risk Areas



# Cohort studies on hepatitis A in non-immune travelers to developing countries

Cases	Subjects	Duration of stay	Incidence rate	Ref Year(s)
7	7887 Swiss travelers, 60% non-immune (?)	mean 19 days	1 per 300	1 1981-84
52	108 French foreign aid volunteers	18-35m	1 per 50	2 1979-80
67	US Foreign Service personnel (n?)	N / A	≤1 per 5,000	3 1990-93
325*	Canadian travelers	variable	1 per 3000	4 1996-2001

Ref 1: Steffen R et al. J Infect Dis 1987;156:84-91

Ref 2: Larouzé B et al. Am J Epid; 1987;126:31-37

Ref 3: Wolfe MS. J Infect Dis 1995;171, Suppl 1, S29-32

Ref 4: Teitelbaum P. J Travel Med 2004;11:102-107 – \* estimated

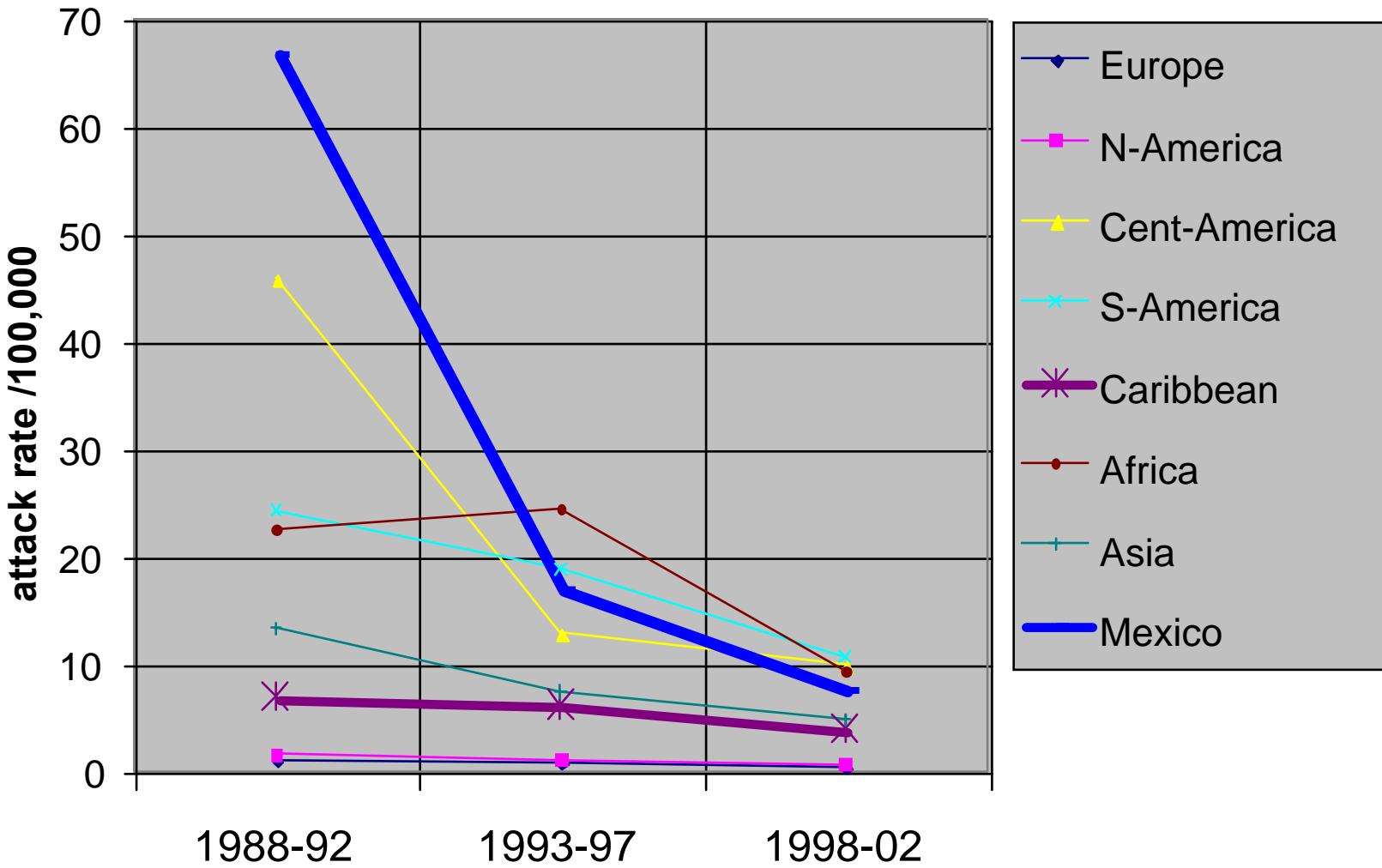
# NEW DATA: Importation of Hepatitis A, Switzerland 1988-2002

Yugoslavia (Ex-)	226
Turkey	167 (secondary outbreaks)
Italy	164
Spain	147
France	131
India	110
Morocco	109
Brazil	84
Mexico	71
Egypt	69
Tunisia	67
USA	56
Thailand	48
Germany	43
etc.	
Total	2581 with travel history

# Consider: UNDERREPORTING!

- no laboratory report rare (<20%)
  - no M.D. report missing details
  - diagnosed and treated abroad n unknown!!
  - not diagnosed
    - asymptomatic secondary cases!
    - symptomatic rare

# Hepatitis A attack rate in non-immune Swiss travellers



# Monthly incidence rates of Hepatitis A in non-immune travelers to developing countries

Travel to:	INCIDENCE RATE / MONTH	HA VACCINATION
- Developing country	>0.1 / month	Recommended
- Asian / African Mediterranean	<0.1 / month	Recommended
- Eastern Europe	<0.1 / month	Recommended, especially to VFR (!)
- Southern Europe	<<0.1 / 1000	No recommendation

**now 1:3000**

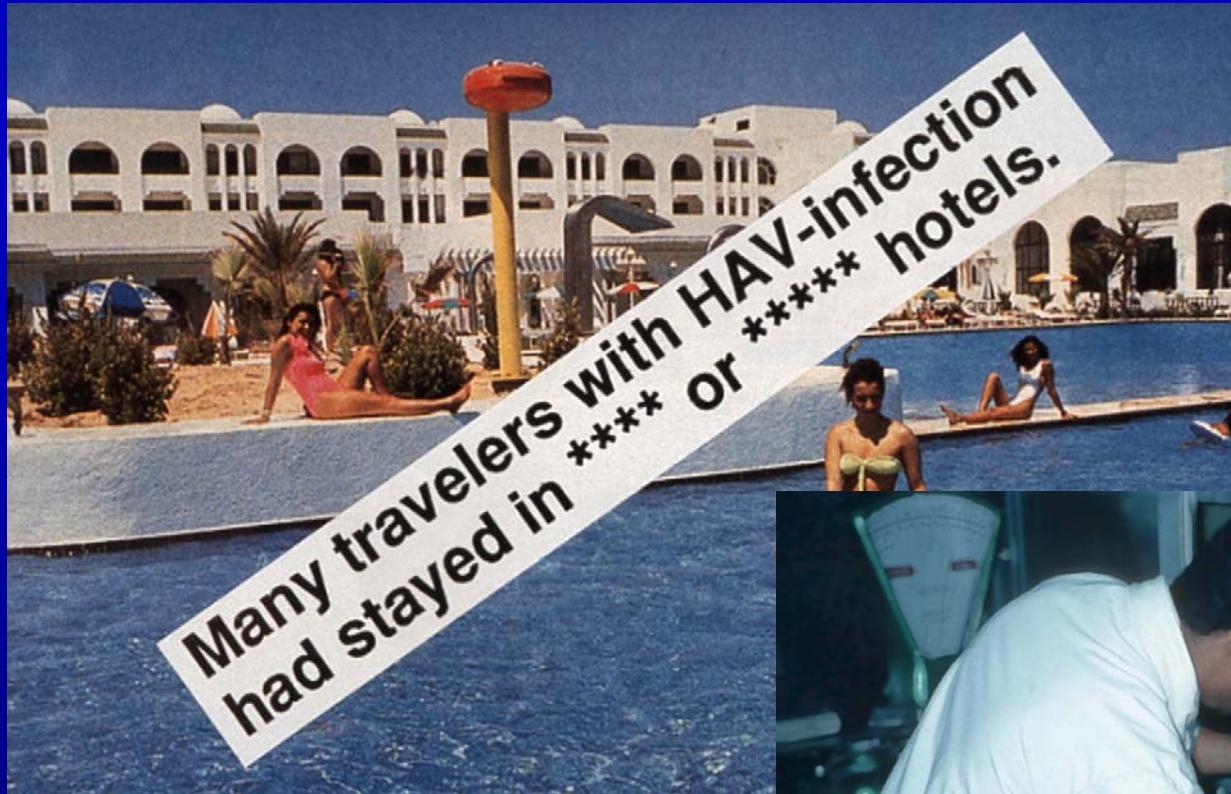
**Old 'Steffen – Rate' 1:300 is obsolete!**

# Hepatitis A outbreak Europe 2004

352 tourists (mainly Germans) diagnosed after a stay in the Siva Grand Beach Hotel, Hurghada, Egypt



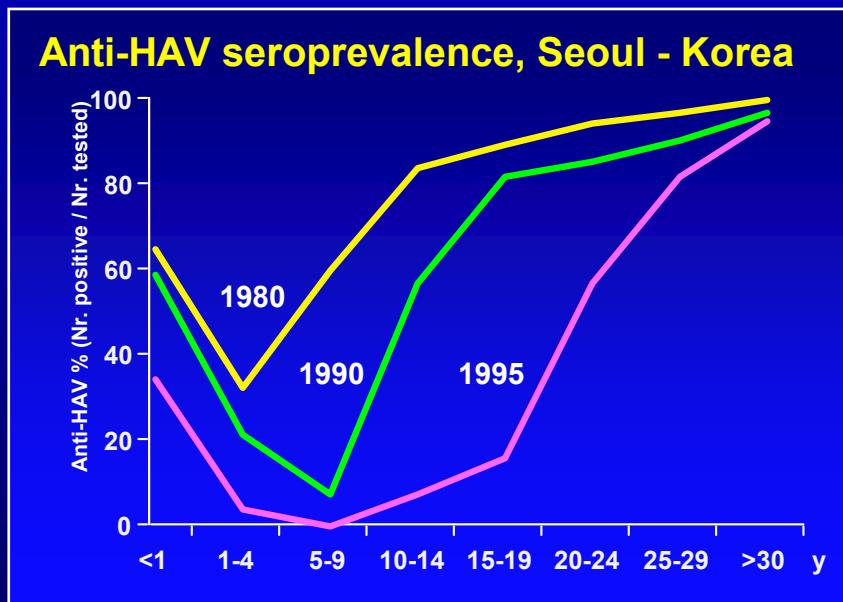
2005: – Russia  
– Turkey → Holland



**.... but risk less as compared to low-budget places.**

# Asians adults immune to hepatitis A?

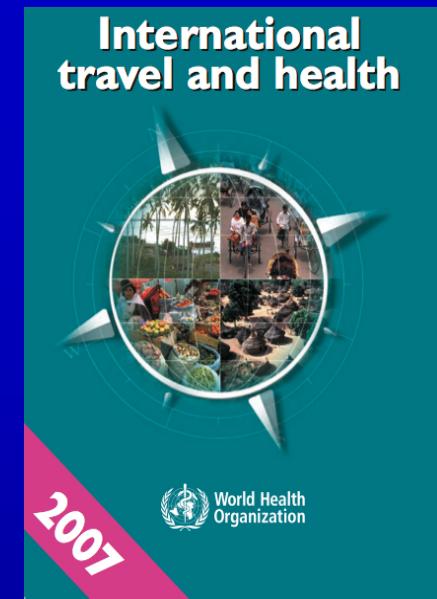
**NO:** Hygiene → shift towards low endemicity



- Urban areas  
(e.g. Korea, China, Singapore)
- High income class
- Improved infrastructure  
(e.g. Kerala vs. rest of India)
- Ethnic origin (e.g. Israel, KSA)

Poovorawan Y et al. J Gastroenterol Hepatol 2002;17 Suppl:S155-66  
Symposium on Epidemiologic Changes of Hepatitis A Infection in Korea. Jeju Island, June 14, 1997

- Hepatitis A most common vaccine preventable infection is travellers (except influenza)
- Impact ! (Incapacitation, CFR)
- Vaccine should be considered for all (non-immune) travellers to areas with moderate to high risk and
- those at high risk strongly encouraged to accept vaccination



# Hepatitis A: Options for Prevention

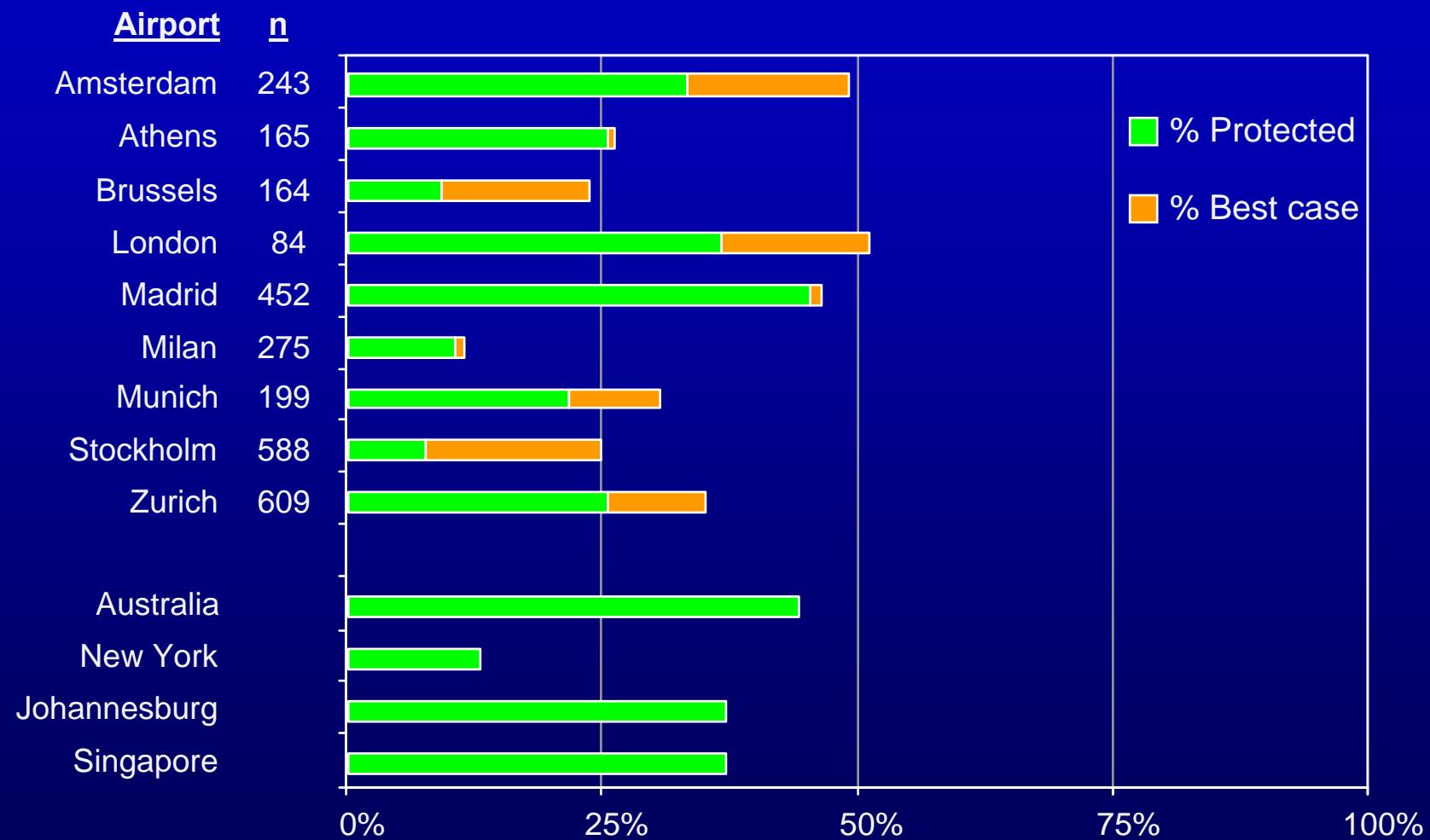
Reduction of risk exposure!

"Boil it, cook it, peel it — or forget it!"



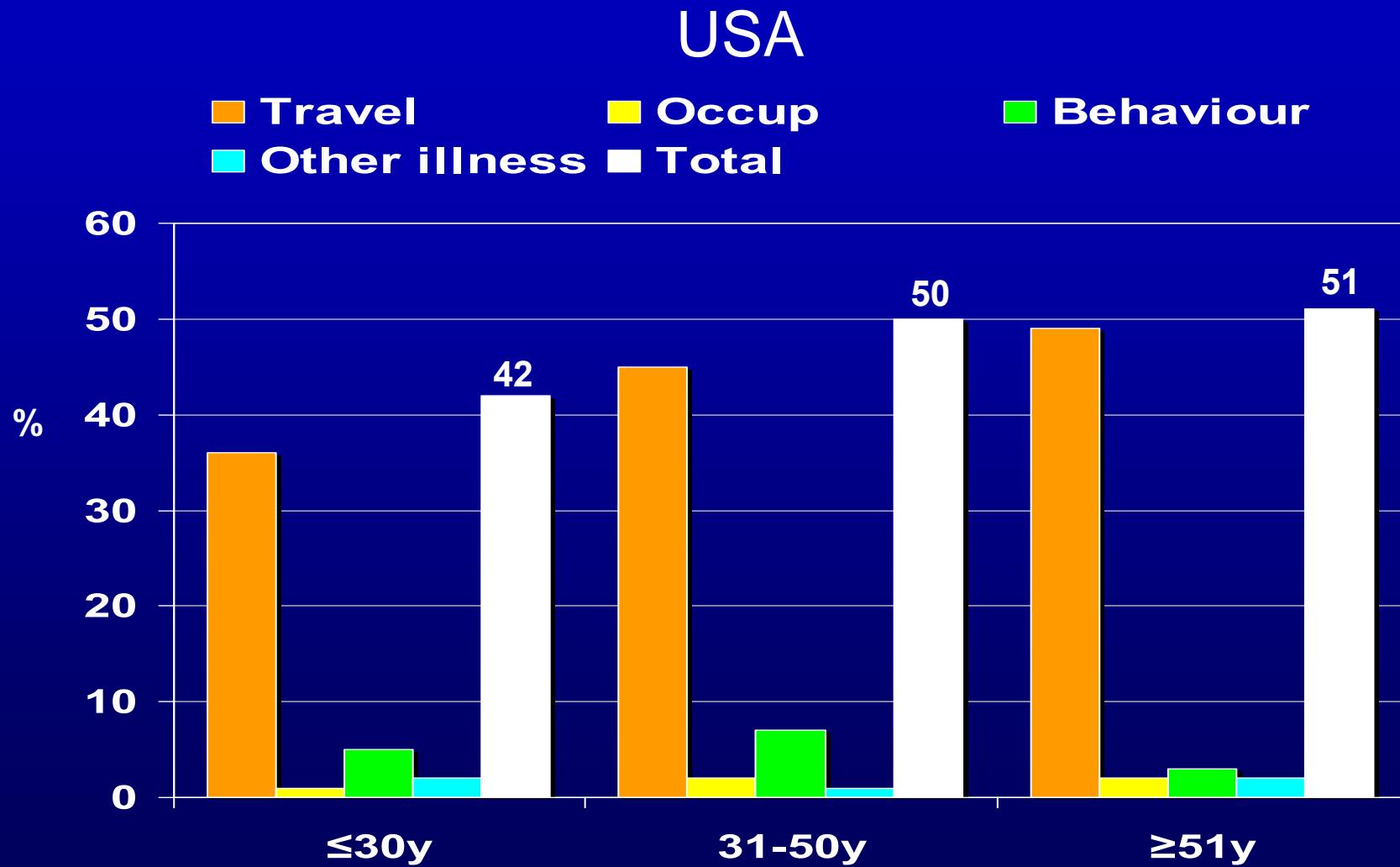
Europeans, Americans: >90% NON-compliant

# Proportion of anti-HAV positive travelers to developing countries



# Prevalence of exposure to HAV

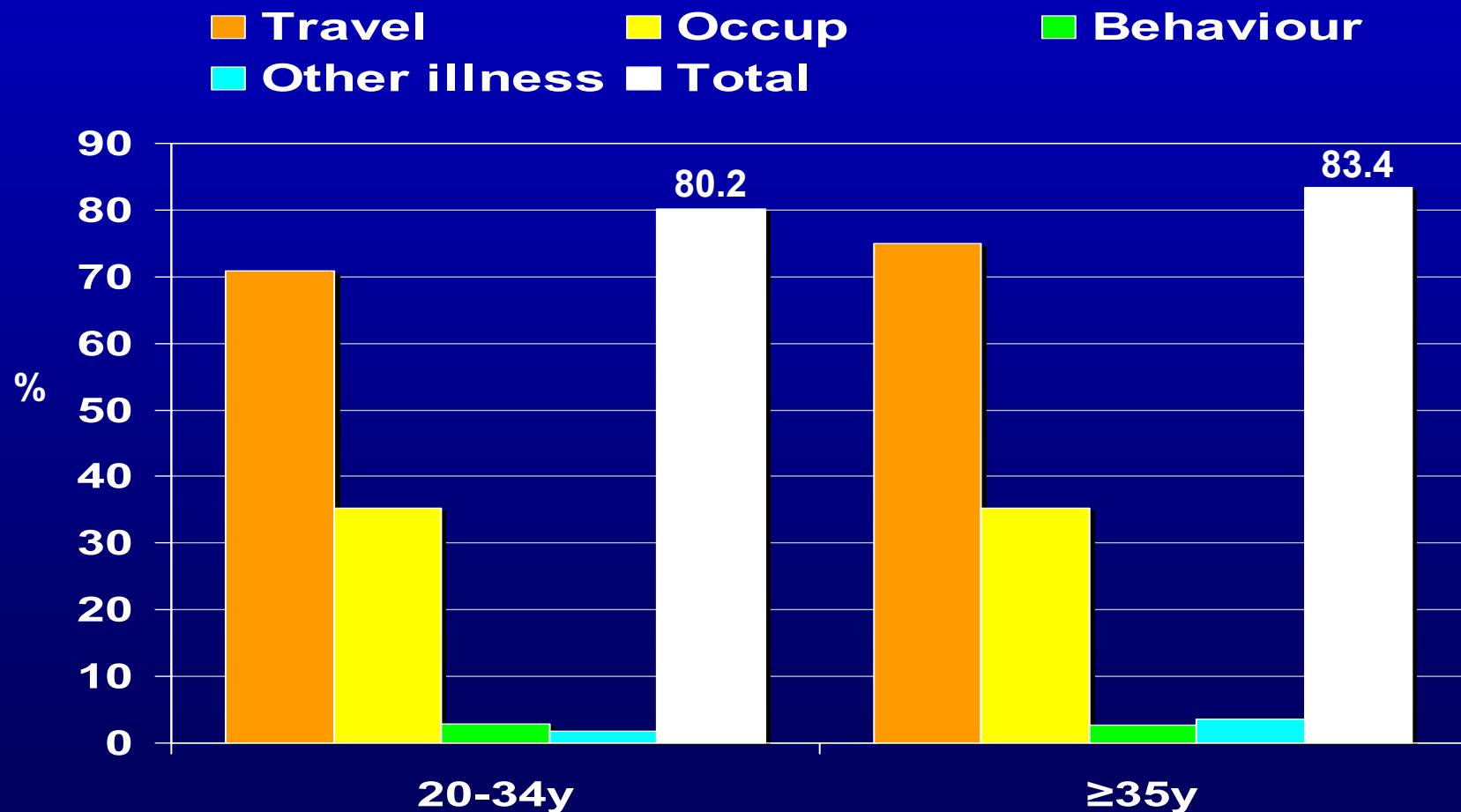
## based on national immunization recommendations



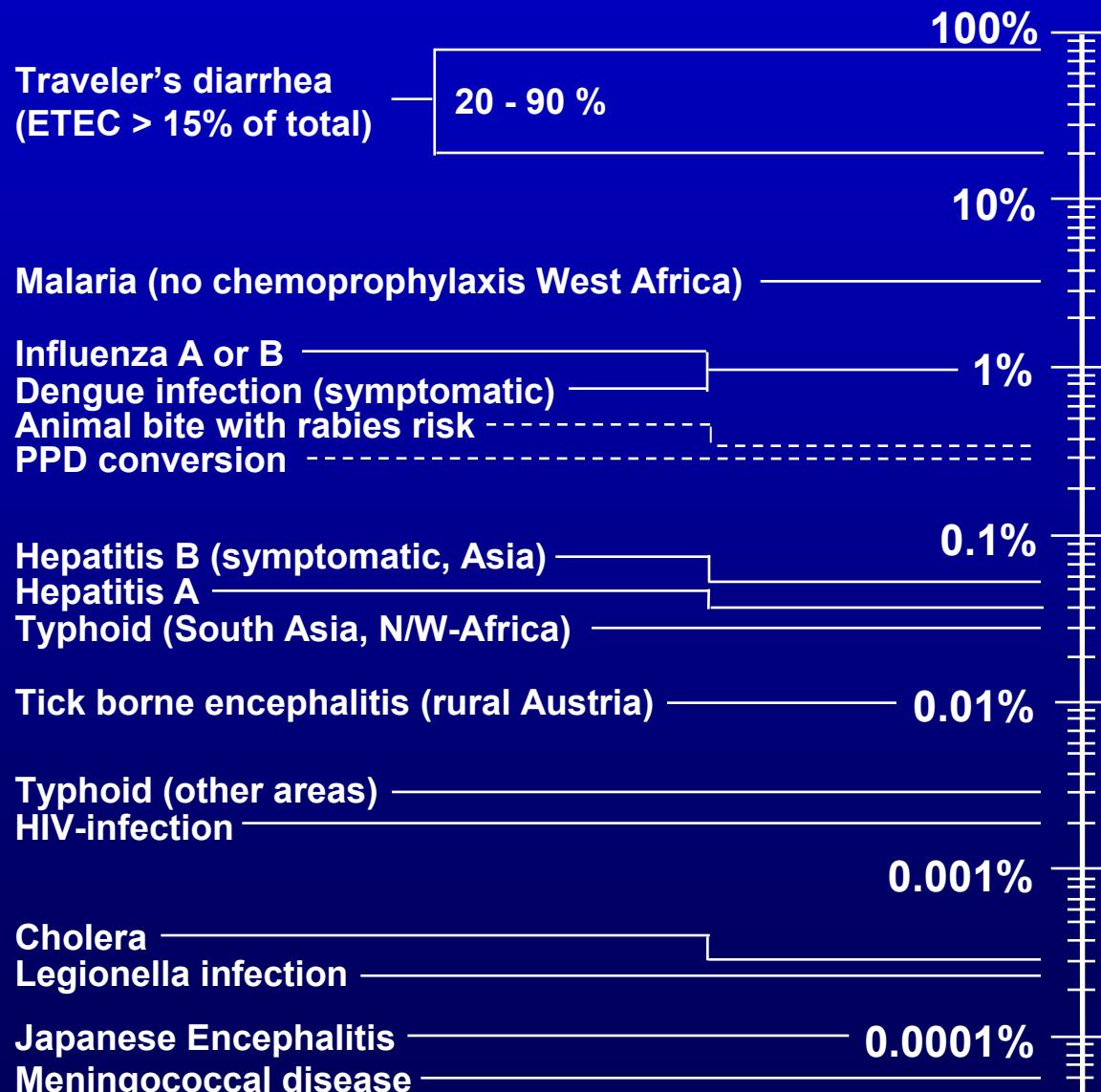
# Prevalence of exposure to HAV

## based on national immunization recommendations

Switzerland

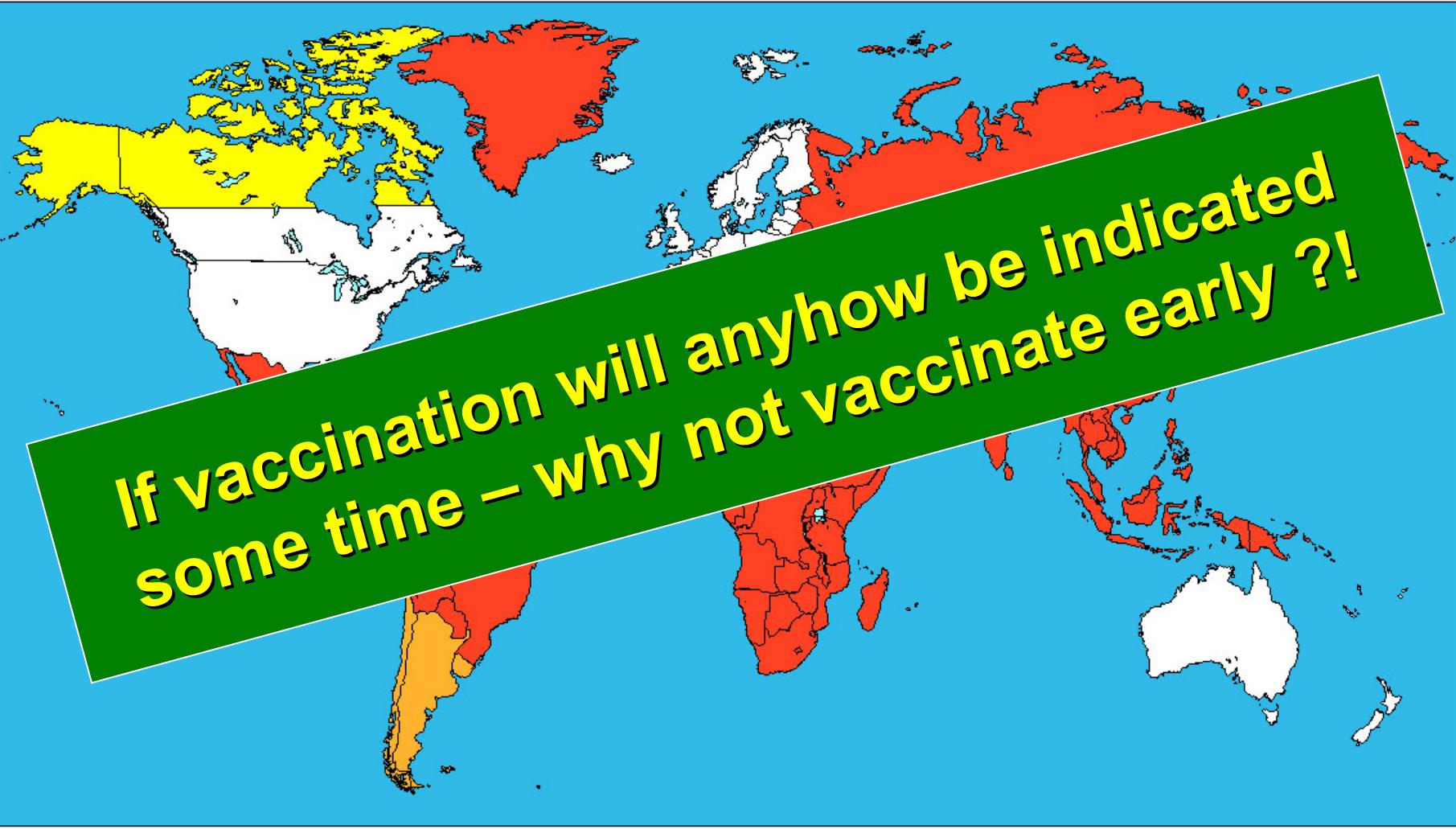


# Incidence rate / month of health problems during a stay in developing countries – 2008



# Conclusions

- Persisting risk of HA in travelers
- Risk of infection ↓ × 10 (S. Europe!)
- New target populations in middle-income economies
- Unsatisfactory compliance among travelers
  - food/beverage intake
  - Vaccination
- In some countries, HA vaccination will be indicated in a large majority of the population at some stage in life



If vaccination will anyhow be indicated  
some time – why not vaccinate early ?!

Risk high/medium

■ HA + HB

■ HA

■ HB

(Advantage: combined Hepatitis A + B vaccine)