COUNTRY AND REGIONAL EXAMPLES OF HEPATITIS A PREVENTION

ARGENTINA

Dra. Marta N. Vacchino
Ministry of Health.
Argentina
investigacion@ine.gov.ar
Hepatitis A
Argentine situation

- Argentina’s Ministry of Health implemented in 2005 universal hepatitis vaccination with a single dose at 12 months of age.
- It was decided to monitor the impact and follow up the strategy in order to decide or recommend a second dose.
REPORTED RATES AND CASES OF HEPATITIS A*, ARGENTINA, 1994-2007**

*It includes non specific Hepatitis reported. ** up to week 39, 2007.

Source: S.V.N.S. Ministry of Health. Argentina

66.9 % reduction (Average pre-outbreak vs 2006)

83.7% Vaccination program

*It includes non specific Hepatitis reported. ** up to week 39, 2007.

Source: S.V.N.S. Ministry of Health. Argentina
Hepatitis A—Argentina, 1994-2007*

*calculated up to week 39
Proportion of non specific Hepatitis reported, Argentina 1995-2004.

Source: S.V.N.S. Ministry of Health. Argentina
INCIDENCE OF HEPATITIS A* BY AGE GROUP
ARGENTINA, 1995-2006

~57% reduction (Average pre-outbreak vs 2006)

~80.0%

*It includes non specific Hepatitis reported.
Source: S.V.N.S. Ministry of Health. Argentina
INCIDENCE OF HEPATITIS A* BY AGE GROUP
ARGENTINA, 1995-2006

*It includes non specific Hepatitis reported.
Source: S.V.N.S. Ministry of Health, Argentina
HEPATITIS A* RATES. ARGENTINIAN REGIONS.
2005-2007**

*It includes non specific Hepatitis reported, ** up to week 39, 2007.

Source: S.V.N.S. Ministry of Health. Argentina
VACCINATION HAV ARGENTINA AMONG CHILDREN AGED BY PROVINCES, ARGENTINA, 2006

REFERENCES

60-89%
90-94%
95% and more

Dr Cervio et al, Global Hepatitis A Meeting Data from: Garrahraam, Italiano and Austral Hospitals and Favaloro Foundation (n=209).
ACUTE LIVER FAILURE (ALF) BY ETIOLOGY.

HEP A VACCINATION

50.0%
92.3%

Dr Cervio et al, Global Hepatitis A Meeting Data from: Garraham, Italiano, Austral Hospitals and Favaloro Foundation (n=406).
TREND OF ALF CAUSED BY HEP A VIRUS AFTER VACCINATION.

July 2005-July 2007 (Monthly)

Argentina

Dr Cervio et al, Global Hepatitis A Meeting Data from: Garraham, Italiano and Austral Hospitals and Favaloro Fundation.
Protocol Number 1:

Objective:

to determinate the persistence of protective antibodies after the application of a single dose of anti HAV vaccine.
SPECIFIC OBJECTIVES:

a) To determine in selected areas the persistence of Hep. A antibodies protective levels in different children’s cohorts after the application of a single dose of anti HAV vaccine

b) To determine the annual variation amid cohorts of the geometric mean of antibodies titles during the period of the study.

c) To analyze the relationship within the persistence of protective levels of antibodies against HAV and socio-economic and environmental conditions.
METHODOLOGY

Study design

It will be carried out a prospective longitudinal descriptive study in selected areas

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Ig total anti-HAV  Hepatitis A vaccine
Protocol Number 2:

Objective: To determinate the seroprevalence of total HAV antibodies in 2-3 year-old children that presumably received the HAV vaccine of the National calendar of Immunization and to compare with historical data.

Methodology: Study design: transversal descriptive study. Sampling: cluster sampling. WHO design.
To investigate the vaccination status of Hepatitis A or non-specific Hepatitis reported cases
Recently the registration form was modified.
Cost-effectiveness*

✓ The single-dose vaccination policy is predicted to reduce each birth cohort member’s 50-year probability of overt hepatitis A from 7.2% to 4.1%.

✓ A second dose would reduce the probability to between 2.0% and 2.2%.

✓ Vaccination at 12 months of age, at 12 and 72 months, or at 12 and 18 months would reduce cases among personal contacts by 82%, 87%, and 92%, respectively.

* Alejandro Ellis et al. Rev Panam Salud Publica/Pan Am J Public Health 21(6), 2007
Greater health gains are derived from the first than second hepatitis A vaccine dose.

However, this analysis supports the cost-effectiveness of providing both first and second doses to children in Argentina.

* Alejandro Ellis et al. Rev Panam Salud Publica/Pan Am J Public Health 21(6), 2007
HAV VACCINES ACQUIRED IN ARGENTINA

2005-2007
2,550,000 DOSES

MERCK
AVENTIS PASTEUR
BERNA - BIOTECH
GLAXO SMITH KLINE

COST: ~25% OF VACCINATION BUDGET

CONCLUSIONS:

- 66.9% reduction in reported incidence (pre-outbreak vs 2006).
- 49.5 to 69.7 % reduction in reported incidence in age groups 1 year old to 49 years old (pre-outbreak vs 2006)
- 83.7% reduction in reported incidence (2004-2006).
- 79.1 to 82.6 % reduction in reported incidence in age groups 1 year old to 49 years old (2004-2006).
- 38.9% reduction in group 50 years old and more (2004-2006).
- Important incidence reductions in all Argentinean regions.
THANKS !!!