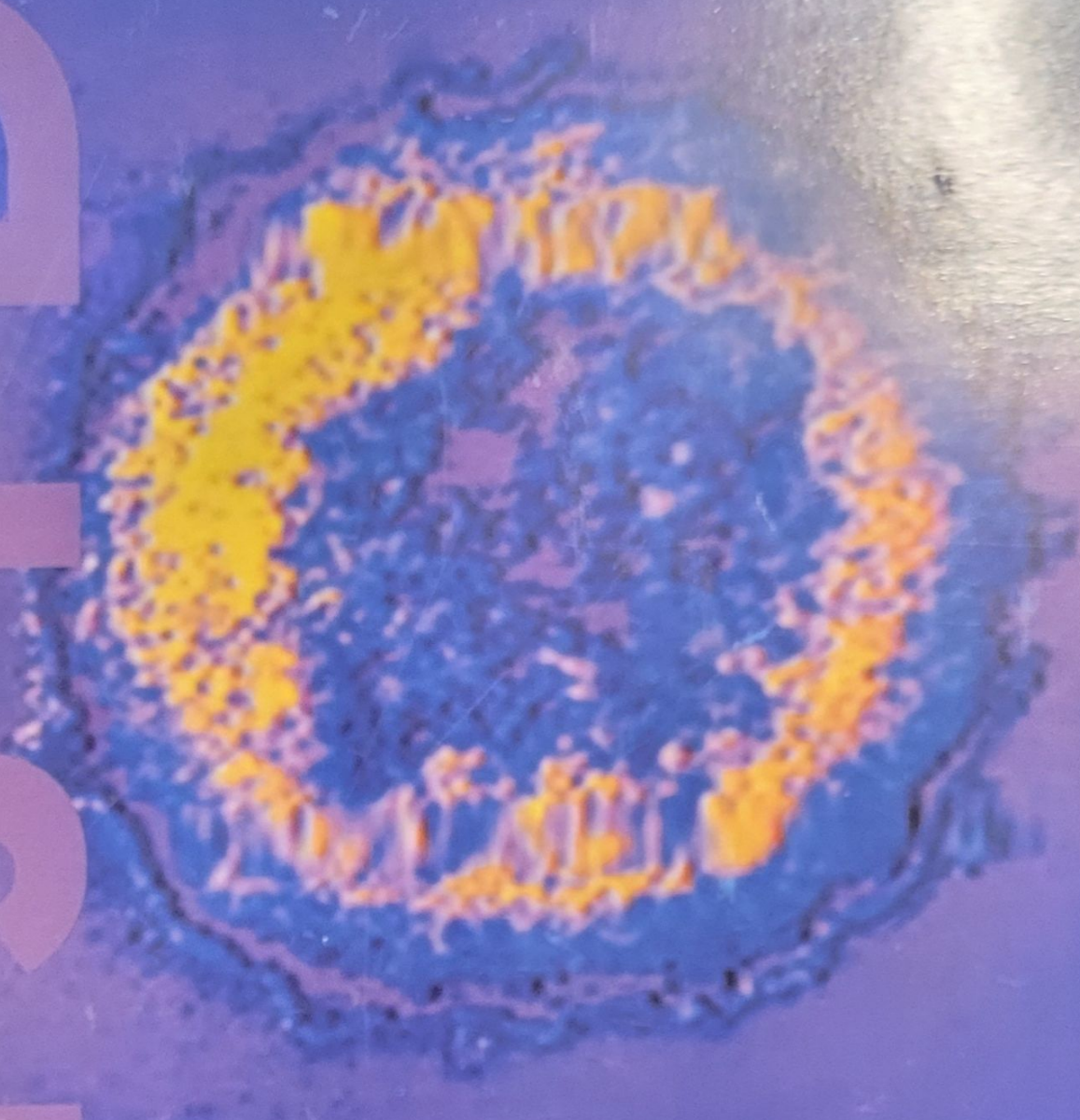


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11TH ICID ABSTRACTS



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# International Journal of Infectious Diseases

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indicated that 54 individuals (20.5%) were positive and 2 of them (9.8% of overall) had infectious hepatitis (overall) had only HBsAg positive, 11 individuals had an immune state for HBV and 8 persons (3.5%) had HBeAg. Also, 7 Persons (3 women and 4 men) had HBeAg. CV and 4 persons (2 women and 2 men) (11.7%) had HBeAg and relative risk of HBV, HCV and HIV was much higher rate than normal population. (n=23 respectively)

of gypsies as nomadic and marginal dwelling, lack of hygienic disciplines, as well as multiple partners and high communicable diseases and causes of these diseases in these societies. We suggest that, a good and effective vaccine for gypsies should be considered so that they can be protected from these diseases.

Hepatitis B, AIDS, gypsy, Prevalence, Risk Factor.

### Levels to Hepatitis-B (HB) Surface Antibody in Vaccinated Health Care Workers (HCV): A Booster?

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mandatory in hospitals. Current data show that HB surface antibody (anti-HBs) levels may decline over time (anamnesic anti-HBs response) remains high after immunization. However, protective levels are above 10 IU/ml. In hospital personnel it has not been determined if levels are protective and is not clear if a booster dose is necessary. This study was to measure the prevalence and levels of anti-HBs in the National Institute of Medical Sciences and Nutrition after 5 years of a complete schedule was given with the booster dose and the rate of response to a booster.

Results: 100 samples were obtained to measure antibody titers against HBsAg. Simultaneously a booster dose of recombinant HBsAg vaccine was given. A second blood sample was obtained 6 months later. Results: The response to the booster dose was 65.6% for men (p=0.03).

Conclusion: 5 years of a complete HB vaccine schedule most likely maintains antibody levels (<10 IU) to surface antigen-HBs. As time increases significantly the levels in 77.8%. As compared to the general population to HB the policy to give a booster

### Role of Baby-linked Immunogenetic Factors in the Vertical Transmission of Hepatitis C Virus

Arriola<sup>1</sup>, M. Martinetti<sup>2</sup>, L. Salvaneschi<sup>3</sup>, B. Salati<sup>1</sup>, G. Arriola<sup>5</sup>. <sup>1</sup>IRCCS Policlinico San Matteo, Pavia, Italy; <sup>2</sup>Department of Infectious Diseases, Pavia, Italy; <sup>3</sup>Immunogenetics Unit, IRCCS POLICLINICO SAN MATTEO, Pavia, Italy; <sup>4</sup>Disease Unit, Ospedali Riuniti, Bergamo, Italy

of infant transmission of Hepatitis C Virus (HCV) represents a pediatric HCV infection today but the rate of vertical transmission is low. Data about specific predictors of HCV trans-

mission are conflicting. Although the hypothesis regarding the role of host defenses is highly intriguing, immunogenetic influence has been poorly investigated. All existing studies on associations between HCV and genetic markers have been done in adults and are mainly confined to HLA-class II serological polymorphisms.

**Study Design:** Among 290 parities of HCV-RNA infected women, 21 babies (7%) resulted infected (HCV-RNA steadily positive over 20 months of age). All the 21 infected babies, 44 randomly selected uninfected ones (steadily negative for HCV-RNA during a follow-up of 2 years) and their mothers were investigated for HLA-G,-C,-DRB1,-DQA1 and -DQB1 molecular polymorphisms. Several non immunogenetic parameters were also considered and their contribution was weighted by multivariate analysis.

**Results:** Among the different covariates, a hierarchy of susceptibility has been settled using multiple logistic regression analysis: HLA-Cw\*07,-G\*010401,-DRB1\*0701,-DRB1\*1401, maternal viral genotype 1b, male sex, first birth and breast feeding can be considered as risk factors for HCV vertical transmission. On the contrary, protection was conferred by the HLA-DQB1\*06,-G\*0105N,-Cw\*0602,-DRB1\*1104,-DRB1\*1302 alleles and by formula feeding.

**Conclusions:** Our study demonstrates that the immunogenetic factors related to maternal and neonatal HLA profile may affect HCV vertical transmission and is independent from the other non immunogenetic parameters. The finding of babies genetically able to fight the virus so precociously could be a tangible demonstration of the feasibility of a successful vaccine

42.016

### Etiological Aspects of Chronic Viral Hepatitis

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**Background:** Chronic hepatitis (CH) is an inflammatory reaction of the liver, which lasts more than six months and is manifested in the array from mild inflammation to necrosis. The aim of this study is to show the association of HBV and HCV infection in pathogenesis of CH.

**Material and Methods:** In this study 316 patients were analyzed as outpatients through Hepatitis Department at the Clinic for Infectious Diseases. Diagnosis was made with biochemical and serological tests, ultrasonography, scintigraphy, and liver biopsy.

**Results:** 316 patients with CH were analyzed during 5 year period (1998-2002). 172 (54.4%) had HBV, 136 (43.1%) HCV and 8 (2.5%) co-infection with HBV and HCV. Genotypization was performed in 110 patients, 78 (70.9%) had C1, 31 (28.2%) C3, and 1(0.5%) C2. Out of 41 patients with CHB, eight had HDV co-infection. CH was diagnosed in 36/316 children (11.4%), all with CHB, whereas adults had equal allocation of CHB and CHC, 50%, 50% respectively.

**Conclusion:** HBV and HCV infection plays an important role in the etiology of CH. Children predominately have CHB, contrary to adults where CHB and CHC are equally distributed, with predominance of C1. Early detection of the disease as well as contemporary aspects of treatment of CH give newer, more optimistic vision concerning prognosis of this disease.

42.017

### The Etiology of Viral Hepatitis in Baghdad During 1991-2000

A. Al-Abbasl. College of Medicine, Baghdad, Iraq

**Background:** The etiology of viral hepatitis in Baghdad for the last decade was studied to find out their viral causes among hospitalized cases.

**Methods:** The cases of acute viral hepatitis admitted in Ibn-Elkhatheeb Fever Hospital in Baghdad were the sample of this presentation which was a hospital-based study. The diagnosis depended on the use of anti HAV-IgM, HBS Ag and anti HBc antibodies for hepatitis B, anti HCV, anti HDV and anti HEV IgM antibodies. The cases were under the authors care.

**Results:** The results revealed the total number of cases of viral hepatitis in the above fever hospital for the last decade was 3341 cases comprising 1717 females and 1624 males with a female: male ratio of 1.06:1. The profile of percentage of different types of hepatitis was the following: HAV 39.3%, HBV 22.1%, HCV 3.3%, HDV 3.3% and HEV was 20%. Mixed viral infection was present among 6% of the cases; of them 4.5% it was a con-