

PRAHA

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Table 1.

	Genotype 1	Genotype 2	Genotype 3	Genotype 4
Intravenous Drug Administration	5	0	23	0
Sexual intercourse	1		1	0
Blood transfusion	4	2	2	2
Nor determined contag on way	7	4	6	1
High risk groups	0	2	1	0

Table 2. Allotment according to genotype and origins

8	Genotypes	1	2	3	4
	Greeks	13 (28.3%)	9 (19.0%)	22 (47.8%)	2 (4.35%)
	Immigrants	6 (33.3%)	4 (22.2%)	7 (38.8%)	1 (5.6%)

of contagion through sexual intercourse and blood transfusion, there seems to be an equal allotment of genotypes. Finally, the group of the other ways of contagion appears to be influenced by the other groups and is allotted between genotypes 2 and 3, probably because the carrier transmitting the virus belongs to these groups. As regards the origins of the patients, and though the cases are not equally allotted, it appears that there is a differentiation between the Greeks and the immigrants. So the vast majority of the Greeks is allotted between genotypes 2 and 3, while the immigrants are allotted among genotypes 1, 2 and 3 (genotypes 1 and 3 showing a slightly higher percentage).

R2272 Relationship between the level of basal antigenaemia of HCV and hepatic affectation in HIV patients

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Objective: The aim of this work is to study the relationship between the antigenaemia (core Ag) of HCV and the rate of hepatic fibrosis in patients HCV-HIV confected prior the treatment.

Materials and methods: We have studied the levels of HCV antigen (HCV-Ag) in 22 sera from 22 patients with chronic hepatitis C by ELISA (Ortho trak C assay, Ortho Clinical diagnosis, Raritan, NJ, USA). The degree of hepatic fibrosis was studied by the histological activity rate (HAR-Metavir) in hepatic biopsy.

Results: Nine (40.9%) of 22 patients have antigenaemia levels <100 pg/mL. Seven (77.8%) of these patients have a severe hepatic affectation: five (55.6%) have a severe HAR-Metavir (degree 3) and two have a cirrhosis HAR-Metavir (degree 4); and the rest two patients have a moderate HAR-Metavir (degree 2). Six (27.1%) patients have antigenaemia levels from 101 to 175 pg/ mL: three (50%) have a slight HAR-Metavir (1) and the three other a moderate HAR-Metavir (2). Seven (40.9%) patients have antigenemia levels higher than 175 pg/mL: one (14.3%) patient has a slight HAR-Metavir (1), and six patients have a moderate HAR-Metavir (2)

Table. Distribution of patients by HCV antigenaemia level and degree of hepatic affectation (HAR-Metavir)

	HAR-Metavir			
Ag (pg/mL)	Slight (1) No.	Moderate (2) No.	Severe (3) No.	Cirrhosis (4) No.
0–100	0	2	5	2
101-175	3	3	0	0
> 100	1	6	0	0

Spearman's Rho: -0.703.

Conclusion: There is a decrease of antigenaemia with the increase of hepatic affectation (HAR-Metavir) in HCV–HIV coinfected patients.

R2273 Persistence of HBV-DNA in children who cleared HBsAg after IFN treatment

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Objectives: The aim of this study was to assess the long-term clinical and virological response in children with chronic hepatitis B who cleared HBs antigen during IFN- α treatment.

Material and methods: Twenty-seven children who cleared HBsAg during IFN treatment were available for repeated clinical and virological evaluation on the average 8 years (range 7–10 years) after completion of therapy. Serological markers of HBV infection were assessed by use of commercial tests AxSYM (Abbott). HBV-DNA was detected in serum and immune complexes using HBV-Sharp Signal System (Digene).

Results: All children were in good clinical condition without any clinical or biochemical symptoms of liver disease. Two patients (7%) had detectable HBsAg in serum, and one of them was also positive for anti-HBs. The remaining 25 patients were HBsAg-negative, anti-HBs-positive. HBeAg was negative in all subjects, whereas anti-HBs antibodies were present in 16 children. HBV-DNA was detected in 11 (40%) children, mainly in a form of immune complexes.

Conclusions: Our data suggests that HBV replication may persist for years after antiviral therapy-induced clearance of HBsAg.

R2274 Seroprevalence of HBV markers in medical students

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Republic of Macedonia is a region with intermediary seroprevalence of HBV (2–4%) and interfamilial and sexual transmission as a dominant routine. Universal vaccination of newborns is the only cost-benefit measure for prevention. In Macedonia vaccination is not routinely undertaken due to economic reasons, although from 1990 we vaccinated a high risk groups such as health care workers and medical students. For them HBV infection is professional disease.

Objective: To present seroprevalence of HBV markers in medical students and determining additional risk factors.

Material: This study was performed in two phases: phase I included 110 medical students (80 female, 30 male) age range 22–27 (median 24.5), testing ALT and HBV markers (HBsAg, anti HBc total and antiHBs by ELISA, Behring Processor II.). If they had normal ALT levels and negative HBV markers entered phase II and 77 students were vaccinated on voluntary basis. Demographic and personal characteristics including anonymous survey for sexual contacts, were analysed for this group.

Results: From 110 medical students, eight (7.3%) had confirmed previous contact with HBV, three (2.7%) of them are HBsAg carriers. 37/77 (48.1%) have previous nurse training school and all of them performed bloody medical interventions while studying. 12/77 (15.5%) during clinical training as students also practiced medical interventions. 58/77 (75.3%) have regular sexual partner: 29/58 (50%) with safe sex practicing, 19/58 (32.8%) using intermittent and 10 (17.2%) do not use any kind of protection. 17/77 (22.1%) had irregular partners: 11/17 (64.7%) with constant, five of 17 (29.4%) occasional and one of 17 (5.9%) with no protection at all. Two of 77 (2.6%) without sexual contact. No drug users among analysed students, and only one with piercing and tattoo. **Conclusion**: Starting 2004, routine vaccination for all newborns will take place in Macedonia and issue of additional group for vaccin-