

# Hepatitis C (newly acquired)

# Australian national notifiable diseases case definition

This document contains the surveillance case definition for hepatitis C (newly acquired), which is nationally notifiable within Australia. State and territory health departments use this definition to decide whether to notify the Australian Government Department of Health and Aged Care of a case.

Version	Status	Last reviewed	Implementation date
2.0	Reference to individuals <24 months from the newly acquired case definition has been removed to create new category (Hepatitis C (individual aged less than 24 months).  Additional lines of laboratory (definitive and suggestive) and clinical evidence, including evidence to support re-infection.	2022	1 January 2023
	Addition of footnotes regarding inclusion of positive point of care test results as evidence and sustained virological response.		
1.1	In 'Laboratory definitive evidence' change 'Detection of hepatitis C virus by nucleic acid testing in a child aged 28 days to 24 months' TO 'Detection of hepatitis C virus by nucleic acid testing in a child aged 3 months to 24 months.'	July 2014	1 January 2015
	In 'Laboratory suggestive evidence' added 'in a patient with no prior evidence of hepatitis C infection.'		
	In 'Clinical evidence' changed Alanine transaminase (ALT) from seven to ten times upper limit of normal.		
1.0	Initial CDNA case definition.	2004	2004

Newly acquired hepatitis C may be diagnosed in individuals aged 24 months or older at the time of specimen collection. A diagnosis of newly acquired hepatitis C excludes a diagnosis of hepatitis C (unspecified) and hepatitis C in individuals aged less than 24 months at the time of specimen collection.

# Reporting

Only confirmed cases should be notified.

### Confirmed case

A confirmed case requires either:

1. Laboratory definitive evidence

#### OR

2. Laboratory suggestive evidence AND clinical evidence.

## Laboratory definitive evidence

1. Detection of anti-hepatitis C antibody in a person who has had a negative anti-hepatitis C antibody test recorded within the past 24 months

#### OR

2. Detection of hepatitis C virus by nucleic acid testing<sup>1</sup> in a person who has had a negative anti-hepatitis C antibody test result recorded within the past 24 months

#### OR

3. Detection of hepatitis C virus by nucleic acid testing<sup>1</sup> in a person with previous evidence of hepatitis C virus infection who has two negative hepatitis C nucleic acid test results recorded\*where at least one specimen was collected within the past 24 months

#### OR

4. Detection of hepatitis C virus by nucleic acid testing with a different genotype to that previously documented within the past 24 months

# Laboratory suggestive evidence

1. Detection of anti-hepatitis C antibody with no prior evidence of hepatitis C virus infection

#### OR

2. Detection of hepatitis C virus by nucleic acid testing<sup>2</sup> in a person with no prior evidence of hepatitis C virus infection

#### OR

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<sup>&</sup>lt;sup>1</sup> The use of point-of-care tests in the context of this case definition are for the purposes of surveillance. These point-of-care tests for detecting hepatitis C RNA must be listed on the <u>Australian Register of Therapeutic Goods</u> and administered by appropriately trained persons in-line with National Pathology Accreditation Advisory Council's (NPAAC) <u>Requirements for Point-of-Care Testing</u>. Because point of care tests are sometimes used outside of a quality management governance environment or an accredited pathology laboratory (as described by NPAAC), the PHLN laboratory case definition does not apply to tests performed in these settings.

<sup>&</sup>lt;sup>2</sup> The use of point-of-care tests in the context of this case definition are for the purposes of surveillance. These point-of-care tests for detecting hepatitis C RNA must be listed on the <u>Australian Register of Therapeutic Goods</u> and administered by appropriately trained persons in-line with National Pathology Accreditation Advisory Council's (NPAAC) <u>Requirements for Point-of-Care Testing.</u>
Because point of care tests are sometimes used outside of a quality management governance environment or an accredited pathology laboratory (as described by NPAAC), the PHLN laboratory case definition does not apply to tests performed in these settings.

3. Detection of hepatitis C virus by nucleic acid testing<sup>2</sup> in a person with previous evidence of hepatitis C virus infection who has had one negative hepatitis C nucleic acid test result recorded<sup>3</sup> within the past 24 months

#### Clinical evidence

- 1. Clinical hepatitis within the past 24 months (where other causes of acute hepatitis have been excluded, including hepatic flares due to acute exacerbation in a person with previous evidence of hepatitis C virus infection) defined as:
  - a. Jaundice

#### OR

b. Alanine transaminase (ALT) ten times the upper limit of normal

#### OR

2. a person with previous evidence of hepatitis C virus infection with documented completion of appropriate hepatitis C treatment.

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<sup>&</sup>lt;sup>3</sup> Indicates spontaneous clearance of a previous infection or post-treatment sustained virological response (SVR).