



Hepatitis E

Australian national notifiable diseases case definition

This document contains the surveillance case definition for hepatitis E, 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
1.2	<p>Confirmed case</p> <p>Remove requirement for epidemiological evidence so that a positive IgM or IgG in combination with clinical evidence can constitute a confirmed case Remove Epidemiological evidence section</p>	CDWG March 2015	1 July 2015
1.1	<p>Confirmed case</p> <p>Added “OR Laboratory suggestive evidence AND clinical evidence AND epidemiological evidence”</p> <p>Laboratory definitive evidence</p> <p>Replaced “Detection of IgM or IgG to hepatitis E virus. If the person has not travelled outside Australia in the preceding 3 months, the antibody result must be confirmed by specific immunoblot” with “IgG seroconversion or a significant increase in antibody level or a fourfold or greater rise in titre to hepatitis E virus”</p> <p>Added Laboratory suggestive evidence, Clinical evidence and Epidemiological evidence and the following;</p> <p>Laboratory suggestive evidence</p> <p>Added “Detection of IgM or IgG to hepatitis E virus”</p>	CDWG 3 April 2013	1 July 2013

	<p>Clinical evidence Added “A clinically compatible illness without other apparent cause”</p> <p>Epidemiological evidence Added “Travel to a country with known hepatitis E activity between 15 – 64 days prior to onset OR epidemiological link to a confirmed case”</p>		
1.0	Initial CDNA case definition.	2004	2004

Reporting

Only **confirmed cases** should be notified.

Confirmed case

A confirmed case requires **laboratory definitive evidence**

OR

Laboratory suggestive evidence AND clinical evidence.

Laboratory definitive evidence

Detection of hepatitis E virus by nucleic acid testing

OR

Detection of hepatitis E virus in faeces by electron microscopy

OR

IgG seroconversion or a significant increase in antibody level or a fourfold or greater rise in titre to hepatitis E virus

Laboratory suggestive evidence

Detection of IgM or IgG to hepatitis E virus.

Clinical evidence

A clinically compatible illness without other apparent cause.