The CDC’s Surveillance of Acute Hepatitis C Cases Is Poor

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The Centers for Disease Control and Prevention’s (CDC) monitoring of acute, or very early, hepatitis C virus (HCV) cases is woefully inadequate. Publishing their findings in the Annals of Internal Medicine, researchers reviewed medical records from two hospitals and a correctional healthcare system, all in Massachusetts, and compared recorded acute hep C cases with the CDC’s apparent capacity to register these cases.

The researchers identified 183 people diagnosed with acute hep C between 2001 and 2011. A total of 81 percent of these cases were reported to the Massachusetts Department of Public Health. However, less than 1 percent of the cases were reported to the CDC. Moreover, most of the cases did not fit the CDC’s criteria for an acute infection. Part of the problem was that reporting was incomplete; it did not meet the CDC’s requirements for providing negative hepatitis A and B virus (HAV, HBV) test results in order to register an acute case of hep C.

The researchers attributed the lack of proper surveillance to incomplete reporting by clinicians, problematic definitions of what constitutes acute infection, the limitations of diagnostic testing, and imperfect recording of data.

To read the study abstract, click here.

To read the Medscape article, click here. (Free registration with the site is required.)

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