Abstract 29.

Current hepatitis A outbreaks in men who have sex with men - Epidemiological situation in HIV patients in Chile

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Background: In 2017, various countries in Europe and the Americas (including Chile) experienced outbreaks of hepatitis A virus (HAV) infections in men who have sex with men (MSM). In Chile, the rate of hepatitis A susceptibility in this population is unknown. Hepatitis A vaccines are available, but not widely used. Our study aimed to analyze the epidemiology of feco-orally transmitted viral hepatitis (A and E) in HIV patients in Santiago, Chile.

Methods: The study used preserved samples from a previous cross-sectional multicenter hepatitis B study in adult HIV patients attending public (Fundación Arriarán, FA) and private health centers (Clínica Alemana, CA) in Santiago. Specimens were tested for antibodies against hepatitis A (Elecsys® anti-HAV total, Roche) and hepatitis E (recomWell HEV IgG, Mikrogen). Demographic, clinical and laboratory data were obtained from medical records.

Results: A total of 394 patients (FA, 348; CA, 46) were included (93% male). Median age was 38 years and 99% acquired HIV sexually (83% MSM, 17% heterosexual). 15% had AIDS and 96% were on ART. In 79%, HIV viral load was undetectable and median CD4 cell count was 499 cells/µL. Of all patients, 77% (CI95%, 72-81%) were HAV seropositive (FA, 79% [74-82%]; CA, 65% [51-77%]). Patients born before 1960, in the 1960s, and the 1970s had high HAV seroprevalences of 97%, 92%, and 87%, respectively. Those born in the 1980s had intermediate (64%) and those born in the 1990s very low rates (18%). Overall seroprevalence of hepatitis E was 10.4% (77-13.8%), age-dependently ranging from 18% (born before 1960) to 0% (born in 1990s).

Conclusions: Our study highlights that a large proportion of HIV-patients of younger generations are susceptible to HAV. For risk groups such as MSM, vaccination should therefore be provided to control the current outbreak and prevent further spread. More patients of the private health sector in Chile are HAV susceptible, reflecting the more hygienic living conditions, but also the underuse of vaccination. Surprisingly, we detected hepatitis E antibodies in more than 10% of the study population. The epidemiology and clinical relevance of HEV, which has not been described in HIV-patients in Chile, requires further studies.