

Publication

Absence of hepatitis delta infection in a large rural HIV cohort in Tanzania

JournalArticle (Originalarbeit in einer wissenschaftlichen Zeitschrift)

ID 3501308

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Year 2016

Title Absence of hepatitis delta infection in a large rural HIV cohort in Tanzania

Journal International journal of infectious diseases

Volume 46

Pages / Article-Number 8-10

The epidemiological and clinical determinants of hepatitis delta virus (HDV) infection in Sub-Saharan Africa are ill-defined. The prevalence of HDV infection was determined in HIV/hepatitis B virus (HBV) co-infected individuals in rural Tanzania.; All HBV-infected adults under active follow-up in the Kilombero and Ulanga Antiretroviral Cohort (KIULARCO) were screened for anti-HDV antibodies. For positive samples, a second serological test and nucleic acid amplification were performed. Demographic and clinical characteristics at initiation of antiretroviral therapy (ART) were compared between anti-HDV-negative and -positive patients.; Among 222 HIV/HBV co-infected patients on ART, 219 (98.6%) had a stored serum sample available and were included in the study. Median age was 37 years, 55% were female, 46% had World Health Organization stage III/IV HIV disease, and the median CD4 count was 179 cells/ μ l. The prevalence of anti-HDV positivity was 5.0% (95% confidence interval 2.8-8.9%). There was no significant predictor of anti-HDV positivity. HDV could not be amplified in any of the anti-HDV-positive patients and the second serological test was negative in all of them.; No confirmed case of HDV infection was found among over 200 HIV/HBV co-infected patients in Tanzania. As false-positive serology results are common, screening results should be confirmed with a second test.

Publisher Elsevier ISSN/ISBN 1201-9712

edoc-URL http://edoc.unibas.ch/42517/

Full Text on edoc No;

Digital Object Identifier DOI 10.1016/j.ijid.2016.03.011 **PubMed ID** http://www.ncbi.nlm.nih.gov/pubmed/26996457

ISI-Number WOS:000375588900002

Document type (ISI) Journal Article