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Potential conflict of interest: Nothing to report.

No Artifact, Hepatitis E Is Emerging

To the Editor:

Wenzel et al. report a declining hepatitis E virus (HEV) antibody (anti-HEV) seroprevalence in 1,092 German sera obtained in 1996 and in 2011 and conclude that a recent increase of endemic hepatitis E is an artifact caused by increased awareness.¹ We also reported a declining seroprevalence, testing 538 Dutch sera from 1988, 621 from 2000, and 5,239 from 2011; but, in addition, we show that, recently, anti-HEV seroprevalence in young (largely unexposed) adults increased significantly.² In addition, the routine screening for HEV RNA of Dutch blood donations, targeted for solvent-detergent plasma production, in pools of 96, shows an increasing incidence. In the first 6 months of screening (October 2012–March 2013), 7 of 19,191 donations (1:2,742) were found to be confirmed HEV RNA positive. In the most recent 6 months (April 2014–September 2014), 18 of 10,991 (1:611) donations were found to be confirmed HEV RNA positive. Our data indicate that HEV has returned and that HEV infections are increasing in The Netherlands.

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Potential conflict of interest: Nothing to report.

Reply:

We thank Professor Zaaier for his comments on our study “Decline in Hepatitis E Virus Antibody Prevalence in Southeastern Germany, 1996-2011.”¹

We reported a substantially lower hepatitis E virus (HEV) antibody (anti-HEV) prevalence in German sera from 2011, as compared to 1996. We concluded that the increasing rate of notified hepatitis E is likely a result of the improved awareness of the disease and not the emerging nature of hepatitis E.

Professor Zaaier in his letter raised the interesting question about the latest trends in hepatitis E prevalence. He refers to a recent study from the Netherlands, which—in agreement with our findings—demonstrates declining total anti-HEV rates in Dutch sera during the past decades.² But, in spite of that, a prevalence increase by 5.7% was found in the age group of 18-21 years old (7% in 1995 and 12.7% in 2011).

We would like to point out that we did not observe such an effect in our study: The age group 20-29 years old showed a 13.7% reduction in anti-HEV prevalence (28% in 1996 and 14.3% in 2011), a finding consistent with all other age groups we analyzed. However, we cannot exclude a potentially reversed trend in Germany in the very recent past, given that our study was not designed to investigate the seroprevalence development during the very last years. It should be most interesting to address this question in future studies also in Germany.

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