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CORRESPONDENCE

SEROPREVALENCE OF HEPATITIS B AND C INFECTION MARKERS AMONG CHILDREN AND ADOLESCENTS IN THE SOUTHERN BRAZILIAN REGION

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Dear Editor,

I read with interest the article published by LIVRAMENTO *et al.*³ in your journal recently. Hepatitis B virus (HBV) infection is one of the most common infectious diseases globally¹. HBV vaccination has changed the epidemiology in most countries in the world². LIVRAMENTO *et al.*³ reported the prevalence of HBsAg 0.76% and total anti-HBc 1.02%, respectively and the copositivity between HBsAg and total anti-HBc was verified in 0.76% of the analyzed samples. I would like to add some information regarding this subject.

First of all I would like to draw the readers' attention to the fact that in Brazil, prevalence of HBV is much higher than reported by LIVRAMENTO *et al.*^{3,5}. However, it cannot be denied that the introduction of HBV vaccination in 1996 as a National Immunization Program in Brazil could impact the prevalence of the disease. To find the impact of HBV vaccination in the Brazilian community, in this study it was necessary to know the age of the infected cases⁴. There were three cases with HBs Ag positivity, therefore we assume that they had been born before the introduction of the national immunization program in Brazil. It is recommended that the study be continued or be carried out in other parts of the country, to see if the result will be different. HBV is more common in people like prisoners⁶ and knowing the risk factors of the infected ones can help the policy makers to better design the strategies to control HBV infection in the community¹. Intensifying HB vaccination of high risk groups and surveillance of hepatitis B infected subjects will further decrease the frequency of the disease in Brazil.

Fortunately no Hepatitis C virus (HCV) infected cases were reported by LIVRAMENTO *et al.* which confirms that the risk factors for acquiring HCV in the Brazilian population is not high enough to detect the HCV infection in their study group.

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REFERENCES

1. Alavian SM. Ministry of Health in Iran is serious about controlling Hepatitis B. *Hepat Mon.* 2007;7:3-5.
2. Alavian SM, Fallahian F, Lankarani KB. The changing epidemiology of viral hepatitis B in Iran. *J Gastrointestin Liver Dis.* 2007;16:403-6.
3. Livramento A, de Cordova CM, Spada C, Treitinger A. Seroprevalence of hepatitis B and C infection markers among children and adolescents in the southern Brazilian region. *Rev Inst Med Trop Sao Paulo.* 2011;53:13-7.
4. Moradi A, Khodabakhshi B, Roshandel G, Kalavi K, Besharat S, Semnani S. Response to the Hepatitis B virus vaccine in Iranian infants. *Hepat Mon.* 2009;9:229-31.
5. Scaraveli NG, Passos AM, Voigt AR, Livramento A, Tonial G, Treitinger A, *et al.* Seroprevalence of hepatitis B and hepatitis C markers in adolescents in Southern Brazil. *Cad Saude Publica.* 2011;27:753-8.
6. Stief AC, Martins RM, Andrade SM, Pompilio MA, Fernandes SM, Murat PG, *et al.* Seroprevalence of hepatitis B virus infection and associated factors among prison inmates in state of Mato Grosso do Sul, Brazil. *Rev Soc Bras Med Trop.* 2010;43:512-5.