Hepatitis E Seroprevalence in Dialysis in Southern Reunion Island

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Dear Sir,

Reunion Island has known considerable development throughout the last few decades. Nevertheless, it keeps some characteristics peculiar to developing countries, like a 96.9% prevalence of hepatitis A serologic markers in the general population [1]. Hepatitis E, recently identified, has a geographical distribution and epidemiologic feature which are often close to that of hepatitis A [2], both being fecal-oral transmitted virus. Recently, a particularly high prevalence (11 %) has been pointed out in a French hemodialysis center [3], while not found in Ireland [4], needing to establish whether hepatitis E could be transmitted through hemodialysis.

This urged us to find out whether a particular prevalence of these markers occurred within the dialyzed patients' group, in a potentially high-risk region. In January 1995, we performed a serology on each of our dialyzed patients (hemodialysis n = 62, peritoneal dialysis n = 10). The systematic prophylactic measures, taken in our hemodialysis center to contain possible risks of viral transmission, consist of generator sterilization, generator and bedding surfaces decontamination, isolation of hepatitis virus seronegative patients, and the use of single-pass dialy-sate delivery (nonrecirculating) systems for seropositive patients. The samples were treated with the immunoenzymatic method (Abbott) at the Institut Pasteur in Lyon (Mrs. Annette Cotisson).

Out of 72 patients, 68 were negative, 2 men were proving to be positive (2.8%). Two women had uncertain results, 1 was in positive gray zone and experienced cytolytic hepatitis 2 months later, 1 was in gray negative zone. The two positive patients have been hemodialyzed since 1983 and 1987; 1 has been on peritoneal dialysis for 2 months. They both carry hepatitis C markers, like 8 other patients in the center. Besides, 1 of the 2 (the one with the longest dialyzing time) carries the hepatitis B surface antigen (triple positivity), without hepatic cytolysis. The 2 women whose results are uncertain are negative for hepatitis C. The one who experienced cytolysis has been in hemodialysis for 1 year; the other was initiating peritoneal dialysis when samples were taken.

Hepatitis E, while present, is probably not very prevalent on Reunion Island. The prevalence of the markers of hepatitis E in our dialyzing population, about 5%, being close to that found

in Switzerland in blood donors (3.2%) and pregnant women (2.1%) [5]. Hepatitis markers seem linked to that of hepatitis C, confirming the observation of Pisanti et al. [6], and supporting the hypothesis of common ways of contamination.

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