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Research Article

PREVALENCE OF HEPATITIS B PATIENTS IN OUTDOOR PATIENTS

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Abstract:

Hepatitis B is a potentially life-threatening liver infection caused by the hepatitis B virus (HBV). It is a major global health problem. It can cause chronic infection and puts people at high risk of death from cirrhosis and liver cancer. This cross-sectional study was conducted in medical outdoor department of DHQ Teaching Hospital Gujranwala. Patients of both gender aging 18 to 60 years were included. A total of 180 patients presenting in outdoor department with any kind of symptoms were screened for Hepatitis B (HbsAg) using rapid screen test kits. The mean age of the patients was 45.56 ± 4.57 years with minimum age of 21 years and maximum age of 58 years. The mean age of male and female patients was 48.24 ± 3.46 and 42.65 ± 2.34 years respectively. There were 98 (54.44%) male patients and 82 (45.56%) female patients. Out of 180 patients 91 patients (50.55%) were positive for HbsAg.

Keywords: Hepatitis B, Outdoor patients

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INTRODUCTION:

Hepatitis B is a potentially life-threatening liver infection caused by the hepatitis B virus (HBV). It is a major global health problem. It can cause chronic infection and puts people at high risk of death from cirrhosis and liver cancer. A safe and effective vaccine that offers a 98-100% protection against hepatitis B is available (1). Preventing hepatitis B infection averts the development of complications including the development of chronic disease and liver cancer. Hepatitis B prevalence is highest in the WHO Western Pacific Region and the WHO African Region, where 6.2% and 6.1% of the adult population is infected respectively. In the WHO Eastern Mediterranean Region, the WHO South-East Asia Region and the WHO European Region, an estimated 3.3%, 2.0% and 1.6% of the general population is infected, respectively. And in the WHO Region of the Americas, 0.7% of the population is infected (2).

The virus is transmitted by exposure to infectious blood or body fluids. Infection around the time of birth or from contact with other people's blood during childhood is the most frequent method by which hepatitis B is acquired in areas where the disease is common. In areas where the disease is rare, intravenous drug use and sexual intercourse are the most frequent routes of infection. Other risk factors include working in healthcare, blood transfusions, dialysis, living with an infected person, travel in countries where the infection rate is high, and living in an institution (3). Tattooing and acupuncture led to a significant number of cases in the 1980s; however, this has become less common with improved sterilization. The hepatitis B viruses cannot be spread by holding hands, sharing eating utensils, kissing, hugging, coughing, sneezing, or breastfeeding. The infection can be diagnosed 30 to 60 days after exposure. The diagnosis is usually confirmed by testing the blood for parts of the virus and for antibodies against the virus. It is one of five main hepatitis viruses: A, B, C, D, and E (4).

MATERIAL AND METHODS:

This cross-sectional study was conducted in medical outdoor department of DHQ Teaching Hospital Gujranwala. Patients of both gender aging 18 to 60 years were included. A total of 180 patients presenting in outdoor department with any kind of symptoms were screened for Hepatitis B (HbsAg) using rapid screen test kits. Patients who were known cases of Hepatitis C, immunocompromised patients and pregnant women were excluded. All the data was recorded and analyzed in SPSS Ver. 25.0. The qualitative variables were presented as frequency and percentages. The quantitative variables were presented as mean and standard deviation.

RESULTS:

The mean age of the patients was 45.56 ± 4.57 years with minimum age of 21 years and maximum age of 58 years. The mean age of male and female patients was 48.24 ± 3.46 and 42.65 ± 2.34 years respectively. There were 98 (54.44%) male patients and 82 (45.56%) female patients. Out of 180 patients 91 patients (50.55%) were positive for HbsAg. Distribution of the patients is as follows:



Graph I: Distribution of cases according to gender

	Male		Female	
Age Group	Total	Positive Test	Total	Positive Test
21-35	33	16	27	10
36-50	37	22	30	16
51-60	28	14	25	13
Total	98	52	82	39

Table I: Distribution of cases according to age groups

DISCUSSION:

In highly endemic areas, hepatitis B is most commonly spread from mother to child at birth (perinatal transmission), or through horizontal transmission (exposure to infected blood), especially from an infected child to an uninfected child during the first 5 years of life. The development of chronic infection is very common in infants infected from their mothers or before the age of 5 years. Hepatitis B is also spread by needlestick injury, tattooing, piercing and exposure to infected blood and body fluids, such as saliva and, menstrual, vaginal, and seminal fluids. Sexual transmission of hepatitis B may occur, particularly in unvaccinated men who have sex with men and heterosexual persons with multiple sex partners or contact with sex workers. Infection in adulthood leads to chronic hepatitis in less than 5% of cases, whereas infection in infancy and early childhood leads to chronic hepatitis in about 95% of cases. Transmission of the virus may also occur through the reuse of needles and syringes either in health-care settings or among persons who inject drugs (5). In addition, infection can occur during medical, surgical and dental procedures, through tattooing, or through the use of razors and similar objects that are contaminated with infected blood. The hepatitis B virus can survive outside the body for at least 7 days. During this time, the virus can still cause infection if it enters the body of a person who is not protected by the vaccine. The incubation period of the hepatitis B virus is 75 days on average, but can vary from 30 to 180 days. The virus may be detected within 30 to 60 days after infection and can persist and develop into chronic hepatitis B (6).

CONCLUSION:

In our study, hepatitis is more prevalent in outdoor patients. Health policies and standards should be designed for prevention.

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