

## **Study subclinical hepatitis A infection in ambulatory patients, with nonspecific abdominal complaints in Mofid hospital of Tehran Iran**

[https://www.researchgate.net/publication/273450559\\_Study\\_subclinical\\_Hepatitis\\_A\\_infection\\_in\\_ambulatory\\_patients\\_with\\_nonspecific\\_abdominal\\_complaints\\_in\\_Mofid\\_hospital\\_of\\_Tehran\\_Iran](https://www.researchgate.net/publication/273450559_Study_subclinical_Hepatitis_A_infection_in_ambulatory_patients_with_nonspecific_abdominal_complaints_in_Mofid_hospital_of_Tehran_Iran)

### **Cited in:**

Health MED 6 (10): 3302-6, 2012

Journal of Society for development in new net environment in B&H

### **Study subclinical hepatitis A infection in ambulatory patients, with nonspecific abdominal complaints in Mofid hospital of Tehran Iran**

Fariba Shirvani, Naimeh Taslimi, Abodlah Karimi, Mohammad Rahbar

Pediatric Infections Research Center, Mofid Children Hospital, Shaheed Beheshti University of Medical Sciences, Iran, Department of Pediatric, Imam Hussein Hospital, Shaheed Beheshti University of Medical Sciences, Iran, Department of Microbiology, Iranian Reference Health Laboratories Research Center, Ministry of Health and Medical Education, Tehran Iran Antimicrobial Resistance Research Center, Tehran University of Medical Sciences, Tehran, Iran.

### **Abstract**

**Background and Objectives:** Epidemiology of Hepatitis A has changed in recent years, and with increasing age, its subclinical nature in childhood turns to more severe hepatitis. Fever and nonspecific gastrointestinal symptoms are found in common viral infections in children; this study tends to detect Hepatitis A infection in these children in an ambulatory referral children centre in Mofid Children Hospital. Tehran, Iran

**Methods:** Three hundreds and ten children aged 1-15 years old with nonspecific gastrointestinal symptoms came to emergency room of Mofid Hospital were selected. Each patient who had 4 from 10 defined clinical criteria and laboratory finding was eligible to enter our study. Patients with any hepatic involvement by a confirmed or nonconfirmed infectious and noninfectious cause and hepatic drug reactions were excluded. All data results entered and analyzed in SPSS 18 software (SPSS Inc Chicago)

**Results:** Three hundred-and-ten patients (184 boys and 126 girls) with mean age of  $7.45 \pm 4.13$  years were investigated. forty (12.9%) were IgM positive and 103 (33.2%) were IgG positive. 90% of hepatitis A IgM positive patients were IgG positive also. 54 patients (17.5%) had SGPT more than 90 IU/ml (more than twice normal), 26 of them (48.1%) were HAV IgM Positive. Logistic Regression Model showed IgM Positive patients had higher Bill (CI=0.22-0.69)  $P=0.001$ , SGPT (CI=38.3-69.9)  $P=0.000$  and % lymph in CBC

(CI=2.7-11.9) P=0.002, and IgG positive patients had higher SGPT (CI=9.7-31.5) P=0.000 and total WBC (CI=578-2185) P=0.001. There was no significant difference between IgM and IgG Positive and Negative groups in number of their positive clinical criteria.

**Conclusion:** Children with nonspecific gastrointestinal signs with more than twice normal SGPT are in high probability of Hepatitis A. Epidemiologic investigation of Hepatitis A in our community is in first priority and shows the necessity of Hepatitis A mass vaccination.

**Key words:** Hepatitis A, Epidemiology of Hepatitis A, Subclinical

## Reference

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