

Non-A, non-B hepatitis

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Non-A, non-B hepatitis

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Abstract

Diagnosis of non-A, non-B hepatitis (NANB) is made after exclusion of other known causes of hepatitis. Parenterally spread non-a, non-B hepatitis (PNANB) and enterally transmitted non-A, non-B hepatitis (ENANB) almost certainly appear to be two different diseases. The definite causative agents have not hitherto been identified. Much of our knowledge of NANB is based on (i) experimental studies on chimpanzees; and (ii) epidemiological studies.

Parenterally spread non-A non-B hepatitis caused by whole blood transfusion and blood-product infusion has different incubation periods and may be caused by different agents. It is a mild disease clinically, and the majority of the patients are asymptomatic. It can be prevented only by judicious use of blood transfusion. Whenever possible, blood/blood products should be derived from individual volunteer donors who are anti-HB_e sero-negative and have serum alanine transaminase of under 45IU/l.

Enterally-transmitted non-A non-B hepatitis is endemic in the Indian subcontinent, South-East Asia, North and East Africa and Latin America. Epidemic NANB is usually transmitted by water supply contaminated with feces. ENANB has a predilection for young adults. The disease is usually mild, except in pregnant women, who have a high case-fatality rate from fulminant hepatic failure. Control measures include provision of clean water supplies, safe disposal of human excreta and sound personal and food hygiene practices.

Keywords: non-A, non-B hepatitis/causative agents/control measures

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