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Hepatitis E (HEV) virus in patients with HIV infection

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The aim of the study was to document the incidence of chronic HEV coinfection in patients with HIV infection and to determine the anti-HEV seroprevalence and compare it with that of a control population. Total of 246 patients with HIV infection and 94 control subjects were tested for HEV using an immunoassay for anti-HEV IgG and were tested for anti-HCV and HBsAg. Demographic, lifestyle and laboratory data were prospectively collected on each patient with HIV infection. The prevalence of HEV IgG seropositivity in the 246 HIV infection is seen in the male group, 19.1% (27/141) were positive as against 29.5% (31/105) in the female group. In addition, subjects over 40 years of age had a higher prevalence of HEV IgG seropositivity than those aged >40 years (OR=2.780, P <0.01). There was no difference in anti-HEV IgG seroprevalence between the HIV-infected patients and controls. The only risk factor predictive of anti-HEV seropositivity was the consumption of raw/undercooked meat or liver; sexual risk factors were unrelated. We also examined the relationship between HEV infection and HBV or HCV coinfection in patients with HIV infection. The results showed no significant difference in HBsAg positive status (6.8% vs 7.4%) and HCV positive status (5.1% vs 6.3%) between HEV IgG positive and negative patients with HIV infection. No statistically significant association between HEV seropositivity and HBV and HCV infection was observed. So, Anti-HEV seroprevalence is similar in controls and patients with HIV infection. Risk factor analysis suggests that HEV is not transmitted sexually. No statistically significant association between HEV seropositivity and HBV and HCV infection was observed.

Biography

Turdieva Nigora is currently working in the Department of Virology Institute of Gastroenterology Academy of Medical Sciences of the Ministry of Health and Social Protection, Tajikistan. She has published more than 3 papers in reputed journals.

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