Hepatitis C, Acute

Merlin disease code=07051
Case report form (CRF): Viral Hepatitis CRF
MERLIN EXTENDED DATA REQUIRED

Background
An acute illness with discrete onset of symptoms consistent with acute viral hepatitis (e.g., fever, headache, malaise, anorexia, nausea, vomiting, diarrhea, and abdominal pain) and either jaundice or elevated liver enzymes (serum alanine aminotransferase [ALT] level >200 IU/L) during the period of acute illness.

A documented negative hepatitis C virus (HCV) result followed within 365 days by a positive result (as described in the laboratory criteria for diagnosis) does not require an acute presentation to meet the surveillance case definition.

Nucleic acid tests for HCV RNA (HCV NAT) include quantitative, qualitative, or genotype testing. No HCV antigen tests are currently approved by FDA. These tests will be acceptable laboratory criteria if and when an FDA-approved test becomes available.

Clinical criteria for case classification
Both of the following:
- Discrete onset of symptoms
- And either of the following:
  - Jaundice
  - Or elevated liver enzymes (ALT level >200 IU/L).

Hepatitis C, chronic cases (Merlin disease code=07054) that meet the following criteria will be reclassified as hepatitis C, acute (Merlin disease code=07051) for investigation (if the person is determined to be asymptomatic or symptoms cannot be determined, the case will flip back to hepatitis C, chronic):
- Bilirubin ≥3.0 mg/dL,
- Or ALT level >1000 IU/L,
- Or a person <18 years old.

Laboratory criteria for case classification
Confirmatory:
1. With clinical criteria, either of the following:
   - Positive HCV NAT
   - Or positive HCV antigen.

2. With no clinical criteria, either of the following:
   - For infants <1 year old, one or more of the following:
     - Positive HCV NAT,
     - Or HCV antigen,
     - Or HCV antibody (anti-HCV);
   - Or for people ≥1 year old, one or more of the following:
     - Negative HCV NAT, HCV antigen, or anti-HCV result followed within 365 days by a positive HCV NAT or HCV antigen result;
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- Or negative anti-HCV result followed within 365 days by a positive anti-HCV;
- Or both of the following:
  - Negative HCV NAT or HCV antigen result in the absence of positive anti-HCV result with the same or earlier specimen event date
  - **Followed within 365 days by** a positive anti-HCV result in the absence of a negative HCV NAT result with the same specimen event date.

**Presumptive:**
Both of the following:
- Positive anti-HCV
- **And** absence of a negative HCV NAT.

**Not a case:**
Both of the following:
- Positive anti-HCV
- **And** negative HCV NAT.

**Epidemiological criteria for case classification**
One of the following:
1. A child ≤3 years old known to be exposed to HCV via a mechanism other than perinatal transmission (e.g., acquired via health care exposure or household contact),

2. Or a person >3 years old with both of the following:
   - No previous diagnosis or Merlin case of acute hepatitis C in the past year
   - **And** no previous diagnosis or Merlin case of chronic hepatitis C,

3. Or a person >3 years old with both of the following:
   - A previous case of acute or chronic hepatitis C with a positive HCV NAT result
   - **Followed by** 2 negative HCV NAT results ≥30 days apart, ≥30 days after the last positive HCV NAT result.

**Case classification**
**Confirmed:**
One of the following:
- A clinically compatible illness in a child ≤3 years old with confirmatory laboratory evidence (1) and epidemiological criteria,
- Or a child ≤3 years old with confirmatory laboratory evidence (2) and epidemiological criteria,
- Or a clinically compatible illness in a person >3 years old with confirmatory laboratory evidence (1) and epidemiological criteria,
- Or a person >3 years old with confirmatory laboratory evidence (2) and epidemiological criteria.

**Probable:**
Either of the following:
- A clinically compatible illness in a child ≤3 years old with presumptive laboratory evidence and epidemiological criteria
- Or a clinically compatible illness in a person >3 years old with presumptive laboratory evidence and epidemiological criteria (2)
Criteria to distinguish a new case from previous reports

See epidemiological criteria for classification. A new probable acute case may be re-classified as a confirmed acute case if a positive NAT for HCV RNA or a positive HCV antigen is reported within the same year. A confirmed acute case may be classified as a confirmed chronic case if a positive NAT for HCV RNA or a positive HCV antigen is reported one year or longer after acute case onset. A confirmed acute case may not be reported as a probable chronic case (i.e., HCV antibody positive, but with an unknown HCV RNA NAT or antigen status).

Reinfection

For individuals with a previous acute or chronic hepatitis C with a positive HCV NAT result, a new confirmed acute case may be created for persons >3 years old when there are two negative HCV NAT results followed by a new positive HCV NAT result, each of which are ≥30 days apart.

Comments

Infants and children ≤3 years old should only be reported as perinatal hepatitis C (Merlin disease code=07058), not acute hepatitis C (Merlin disease code=07051) or chronic hepatitis C (Merlin disease code=07054) unless there is evidence that the case was exposed to HCV via a mechanism other than perinatal transmission (e.g., was acquired via health care exposure). Test results prior to 2 months of age should not be used for classification.

Up to 20% of acute hepatitis C cases will be anti-HCV negative when reported because some (5%–10%) have not yet seroconverted and others (5%–10%) remain negative even with prolonged follow-up. Available serologic tests for anti-HCV do not distinguish between acute and chronic or past infection. Thus, other causes of acute hepatitis should be excluded for anti-HCV positive patients who have an acute illness compatible with viral hepatitis.

Report all available liver enzyme results for every case under liver function tests (Merlin disease code=00000).

See graphic for additional information related to the serological course of disease.

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