

State of California—Health and Human Services Agency California Department of Public Health



GAVIN NEWSOM Governor

- To: California Association of Communicable Disease Controllers California HIV/Sexually Transmitted Diseases (STD) Controllers Association California Conference of Local Health Data Managers and Epidemiologists Other Interested Parties
 From: Rachel McLean, M.P.H., Chief, Office of Viral Hepatitis Prevention, STD Control Branch, California Department of Public Health (CDPH)
- Re: Changes to 2020 Hepatitis C Virus (HCV) Surveillance Case Definitions
- Date: January 2, 2020

I am writing to inform you of important changes to the U.S. Centers for Disease Control and Prevention (CDC) surveillance case definitions for <u>acute hepatitis C</u> and <u>chronic</u> <u>hepatitis C</u>, which became effective January 1, 2020. This <u>case definition revision</u> should begin with cases assigned to surveillance year 2020. CDPH will soon modify related forms and guidelines. In the meantime, here is a summary of the key changes.

1) Age Criteria

All reported acute or chronic hepatitis C cases should be older than 36 months of age. Any positive HCV test result in a child 36 months of age or younger should be investigated as a possible Perinatal Hepatitis C case. A *Confirmed* Perinatal Hepatitis C case is defined as an infant who has a positive test for HCV ribonucleic acid (RNA) nucleic acid amplification test, HCV antigen, or detectable HCV genotype from 2 to 36 months of age (inclusive), and who is not known to have been exposed to HCV via a mechanism other than perinatal.

2) Acute Hepatitis C

The 2020 Acute Hepatitis C Case Definition removes the requirement for the presence of a discrete onset of symptoms for acute cases. Use of bilirubin test results (peak elevated total bilirubin levels 3.0 mg/dL or higher) allow for objective measures of jaundice and can be used in absence of symptoms and/or high peak elevated serum alanine aminotransferase (ALT) levels results.

3) Chronic Hepatitis C, Probable

HCV antibody positive cases with evidence of having cleared their infection (i.e., a known negative HCV RNA test result) at the time of initial report should be considered *Not a Case*. (A person with a positive HCV antibody test result and no or unknown HCV RNA results should still be classified as a *Probable* case.)



ACUTE Hepatitis C				
2016 Case Definition	2020 Case Definition	Notable Changes		
Clinical Criteria	Clinical Criteria	Clinical Criteria		
An illness with discrete onset of any sign or symptom consistent with acute viral hepatitis (e.g., fever, headache, malaise, anorexia, nausea, vomiting, diarrhea, and abdominal pain), AND (a) jaundice,	All HCV cases in each classification category should be > 36 months of age, unless known to have been exposed non-perinatally. One or more of the following: Jaundice, OR Peak elevated total bilirubin	 Requirement that all cases be more than 36 months of age Peak elevated total bilirubin levels 3.0 mg/dL or higher enough to meet acute hepatitis C case definition (including in lieu of jaundice symptoms or peak ALT levels over 200 IU/L) 		
OR	levels ≥ 3.0 mg/dL,	levels over 200 IO/L)		
(b) a peak elevated serum alanine aminotransferase (ALT) level >200 IU/L during the period of acute illness.	OR Peak elevated serum alanine aminotransferase (ALT) levels >200 international units per liter [IU/L],	 Specification that another more likely diagnosis (such as evidence of pre-existing advanced liver disease) should be absent. 		
	AND			
	The absence of a more likely diagnosis (which may include evidence of acute liver disease due to other causes or advanced liver disease due to pre-existing chronic HCV infection or other causes, e.g., alcohol exposure, other viral hepatitis, hemochromatosis)			
Laboratory Criteria for	Laboratory Criteria	Laboratory Criteria		
 Diagnosis A positive test for antibodies to hepatitis C virus (anti-HCV) Hepatitis C virus detection test: Nucleic acid test (NAT) for HCV RNA positive (including qualitative, quantitative or genotype testing) A positive test indicating presence of hepatitis C viral antigen(s) (HCV antigen)* 	Confirmatory laboratory evidence: Positive HCV detection test: Nucleic acid test (NAT) for HCV RNA positive (including qualitative, quantitative, or genotype testing), OR A positive test indicating presence of hepatitis C viral antigen(s) (HCV antigen) Presumptive laboratory evidence: A positive test for antibodies to hepatitis C virus (anti-HCV) Epidemiologic Linkage	Distinction between presumptive laboratory evidence (indicated by a positive HCV antibody test) and confirmatory laboratory evidence (indicated by a positive HCV RNA or genotype test).		
antigen(s) is approved by FDA and available.	No epidemiologic linkage is required for case classification.			

ACUTE Hepatitis C, Continued					
2016 Case Definition	2020 Case Definition	Notable Changes			
Case Classification	Case Classification	Case Classification			
 Probable A case that meets clinical criteria and has a positive anti-HCV antibody test, but has no reports of a positive HCV NAT or positive HCV antigen tests, AND Does not have test conversion within 12 months or has no report of test conversion. 	 Probable A case that meets clinical criteria and has presumptive laboratory evidence, AND Does not have a hepatitis C virus detection test reported, AND Has no documentation of anti-HCV or HCV RNA test conversion within 12 months 	Probable N/A			
Case Classification	Case Classification	Case Classification			
 Confirmed A case that meets clinical criteria and has a positive hepatitis C virus detection test (HCV NAT or HCV antigen), OR A documented negative HCV antibody, HCV antigen or NAT laboratory test result followed within 12 months by a positive result of any of these tests (test conversion). 	 Confirmed A case that meets clinical criteria and has confirmatory laboratory evidence, OR A documented negative HCV antibody followed within 12 months by a positive HCV antibody test (anti-HCV test conversion) in the absence of a more likely diagnosis, OR A documented negative HCV antibody OR negative HCV antibody OR negative hepatitis C virus detection test (in someone without a prior diagnosis of HCV infection) followed within 12 months by a positive hepatitis C virus detection test (HCV RNA test conversion) in the absence of a more likely diagnosis 	Confirmed Clarification that HCV RNA test seroconversion should only be considered an acute HCV case in absence of a prior diagnosis of HCV infection. Note: evidence of HCV reinfection or HCV treatment failure would not be considered acute HCV infection for public health surveillance.)			

CHRONIC Hepatitis C					
2016 Case Definition	2020 Case Definition	Notable Changes			
Clinical Criteria	Clinical Criteria	Clinical Criteria			
No available evidence of clinical and relevant laboratory information indicative of acute infection (refer to the criteria for classification Table VII-B in CSTE position statement 15-ID- 03). Most hepatitis C virus (HCV)-infected persons are asymptomatic; however, many have chronic liver disease, which can range from mild to severe.	All hepatitis C virus cases in each classification category should be more than 36 months of age, unless known to have been exposed non-perinatally. One or more of the following: Jaundice, OR Peak elevated total bilirubin levels ≥ 3.0 mg/dL, OR Peak elevated serum alanine aminotransferase (ALT) levels >200 IU/L, AND	N/A; Note: the chronic HCV case definition requires the <i>absence</i> of clinical criteria.			
	The absence of a more likely diagnosis (which may include evidence of acute liver disease due to other causes or advanced liver disease due to pre-existing chronic Hepatitis C virus (HCV) infection or other causes, such as alcohol exposure, other viral hepatitis, hemochromatosis, etc.)				
Laboratory Criteria for	Laboratory Criteria	Laboratory Criteria			
Diagnosis					
 A positive test for antibodies to hepatitis C virus (anti-HCV) Hepatitis C virus detection test: Nucleic acid test (NAT) for HCV RNA positive (including qualitative, quantitative or genotype testing) A positive test indicating presence of hepatitis C viral antigen(s) (HCV antigen)* 	Confirmatory laboratory evidence: Positive HCV detection test: Nucleic acid test (NAT) for HCV RNA positive (including qualitative, quantitative, or genotype testing), OR A positive test indicating presence of hepatitis C viral antigen(s) (HCV antigen) <i>Presumptive laboratory</i> <i>evidence:</i> A positive test for antibodies to hepatitis C virus (anti-HCV)	Distinction between presumptive laboratory evidence (indicated by a positive HCV antibody test) and confirmatory laboratory evidence (indicated by a positive HCV RNA or genotype test).			
	Epidemiologic Linkage				

ant	/hen and if a test for HCV igen(s) is approved by FDA	No epidemiologic linkage is required for case classification.					
and	and available. CHRONIC Hepatitis C, Continued						
20'	16 Case Definition	2020 Case Definition	Notable Changes				
	se Classification	Case Classification	Case Classification				
Pro	obable	Probable	Probable				
•	A case that does not meet clinical criteria or has no report of clinical criteria, AND	 A case that does not meet OR has no report of clinical criteria, AND 	Clarification that a case with presumptive laboratory evidence (a positive HCV antibody test result) is only considered <i>Probable</i> if there is not a known				
•	Does not have test conversion within 12 months or has no report of test conversion,	 Has presumptive laboratory evidence, AND 	negative HCV RNA result.				
•	AND Has a positive anti-HCV antibody test, but no report of a positive HCV NAT or positive HCV antigen test.	 Has no documentation of anti-HCV or RNA test conversion within 12 months, AND Does not have an HCV RNA detection test reported. 					
Са	se Classification	Case Classification	Case Classification				
Co	nfirmed	Confirmed	Confirmed				
•	A case that does not meet clinical criteria or has no report of clinical criteria, AND	 A case that does not meet OR has no report of clinical criteria, AND 	N/A				
•	Does not have test conversion within 12 months or has no report of test conversion,	 Has confirmatory laboratory evidence, AND 					
•	AND Has a positive HCV NAT or HCV antigen test.	 Has no documentation of anti-HCV or HCV RNA test conversion within 12 months. 					