

[F083] CHARACTERISTICS AND EVOLUTION OF HANTAVIRUS INFECTION IN LIEGE AREA (BELGIUM)

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INTRODUCTION AND AIMS:

Hantavirus is a zoonosis transmitted by rodents responsible in Europe for Hemorrhagic fever with acute renal syndrome (called nephropathia epidemica or NE). Hantavirus epidemics were increased in the recent years in the South part of Belgium. After acute illness, the question could be about its evolution.

METHODS:

This work retrospectively reviews the characteristics of 80 confirmed cases from 2003 to 2007 at the CHU Liège, based on serological detection of positive antibodies against Puumala virus (Hantaan virus).

The mean age was 38y, 2/3 were males.

RESULTS:

The contamination mode was made by walking through forests, cleaning of cellars, henhouses or garden shelters. Very few had a direct contact with rodents through their occupational work.

Cases were noted with a peak of incidence at the end of the spring and the beginning of the summer. By classifying the symptoms and signs, were noted fever (91%), muscle pain (84%), headache (77%), vomiting (45%), diarrhoea (36%), visual disturbances (35%), abdominal pain (29%), cough (27%) and mild hypertension (21%). Biologically, C-reactive protein was increased in 90%. Were noted macroproteinuria in 80% (nephrotic range in 11%), thrombocytopenia (platelet count < 170.10³ /µl) in 61%, liver cytolysis in 60%, serum creatinine increase in 48% (Three cases needed dialysis during the acute phase, one remained chronically dialysis dependent), and microscopic hematuria in 31%.

After 3 months, more than 90% normalized urine tests and platelet counts, 90% and 81% normalized their kidney and liver functions, respectively, 17% were mildly hypertensives (80% with new hypertension).

CONCLUSIONS:

After a severe critical phase, the evolution of Hantavirus infection is usually self-limiting and good. A longer follow up is however required to see if hypertension prevalence for instance continues to increase. Due to climate warming, a higher number of NE could be noted in the near future and nephrologists must inform general practitioners and emergency room medical doctors of such disease in endemic areas.

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