

与增减速度,说明该农村乙肝感染严重,且有新增加趋势,为防治乙肝提供了科学论据。

The Prevalence of HBV in Rural Area of Hebei Province, *Viral Hepatitides Investigation Group of Zhengding County, Hebei Province*

In 1983, 2169 blood samples have been taken from residents of the whole Wuxing area (including six villages) in Zhengding County of Hebei Province, to screen for the Presence of HBV markers. The results are shown as follows.

The HBV infection rate was found to be 56.9%. The HBsAg anti-HBc and anti-HBs were found to be 8.1%, 31.1% and 39.8% respectively.

The HBsAg and anti-HBc decreased progressively with a rate of 6.5% and 4.8% respectively per 10 years. The anti-HBs and the HBV infection rate increased successively at the rate of 4.8% and 1.2% every 10 years.

In children under 10, the HBsAg and anti-HBc decreased successively with a rate of 11.4% and 0.8% per year, while the anti-HBs and HBV infection rate increased progressively with a rate of 11.1% and 3.0% respectively per year.

There were two peaks of the infection. One was in children of 1-4 year old group and the other adults at about 40 years old.

The viral hepatitis Prevalence in 1983 was found to be 912/100,000.

The incidence rate/year was 91.3/100,000, and the Prevalence rate of HBV markers of the hepatitis cases was 85%.

The mortality rate/year from hepatic diseases was 20.6/100,000. 85.7% of the cases died from liver cancer and 5 of the six cases detected had HBsAg in their sera.

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西安市1984年流行性出血热流行情况分析

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西安市自1956年首发流行性出血热至今28年来,发病率呈逐渐上升趋势。1984年西安市所属的7个区6个县发病率为128.11/10万,较1980年发病率升高28.48%,较1981年发病率升高14.7%,较1982年升高109.47%,较1983年升高11.54%。1984年西安市各种传染病发病62507例,死亡385例,而出血热发病占传染病发病总数的11.05%,死亡占78.44%。

西安市共13个区、县,217个乡、镇办事处,已有208个乡、镇有出血热的发生和流行,占95.85%,发病呈高度散发性和严格的地区性。全国出血热专题委员会规定本病年发病率在30/10万以上的为出血热高发区,而西安市13个区、县发病率均在30/10万以上,最高的是未央区,发病率为306.50/10万,最低

的是碑林区,发病率为33.15/10万。

西安市出血热全年各月份均有病例发生,但有明显的季节性,2~9月病例不多,其中3~4月份最少,10~12月份出现大的发病高峰,这三个月发病占全年总发病总数的84.62%,元月份发病占全年总发病数的5%左右。

发病年龄最小者4岁,最大者78岁。16岁至59岁占发病总数的88.76%,以青壮年占的发病比例较大。

发病率逐渐上升,疫区逐年扩大,农村高于城区,青壮年比例较大,并有明显的季节性,这是西安市出血热的发病特点。据长期以来的科学观测,发病与黑线姬鼠的消长有密切关系。