

Italy

Population (January 2013):	59 685 227
Human development Index (2013):	0.872
HAV vaccine recommendations:	HAV vaccination is recommended for specific groups: 1. patients with chronic liver disease and in therapy with coagulation factors 2. MSM 3. PWID 4. People with occupational exposure, e.g. lab personnel 5. 0–6 years old children of immigrant population visiting endemic countries. Universal children vaccination is offered free of charge in Puglia region only: since 1998 to all children 15–18 months of age and from 1998-2003 to 12-year-olds.
Seroprevalence studies by quality score:	score 0: 22 studies score 1: 36 studies score 2: 6 studies 1977–2011
Seroprevalence studies timeframe:	

Seroprevalence assessment: **very low**
Incidence assessment: **low**
Susceptibility in adults: **moderate**

Before 1990, a total of 33 studies were included in the analysis. Of those that provide an estimate of HAV seroprevalence at 30 years of age, all but one report values above 50%. A marked geographical variability is reported at the age of 15, with a strong North-South gradient (Italy_Figure 1).

Similarly, high variability is observed between 1990 and 2000 around the age of 30. Out of 23 studies estimating HAV seroprevalence in this period, 10 give information on the age group up to 30, providing estimates ranging from 8 to 77%, with only three above 50%. No estimate above 50% is reported in the age group below 15 years (Italy_Figure 1).

After 2000, all studies estimated an HAV seroprevalence at less than 50% among adults aged 30. One cohort in 2008 in the Puglia region, aged 16–20, had an HAV seroprevalence estimated at 77%, due to universal children and adolescent vaccination started in 1998 in that region (Chironna 2012). Italy likely transitioned from intermediate to low endemicity in the 1980s, and from low to very low endemicity in the late 1980s (Italy_Figure 1) with an evident geographical gradient, with Northern regions transitioning at an earlier time. It remains a very low endemicity country.

Italy_Table 1. Hepatitis A seroprevalence level by time period

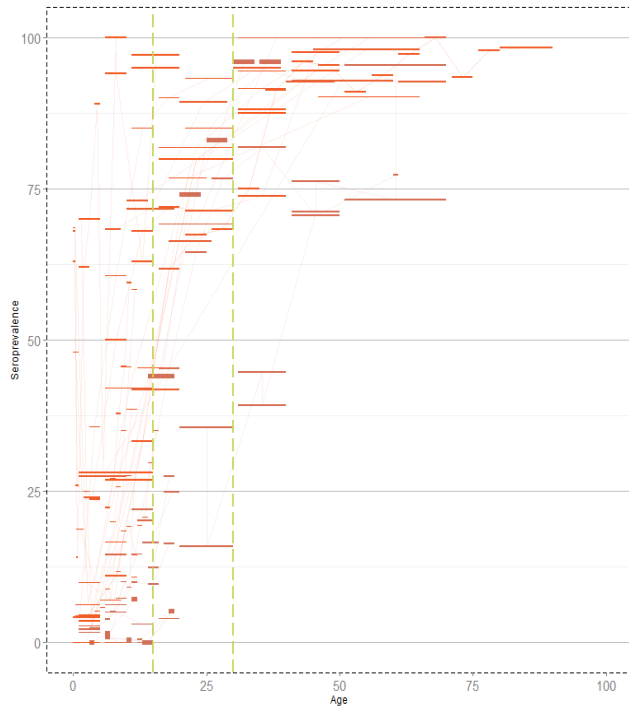
	Very low endemicity	Low endemicity	Intermediate endemicity
1975–1989			
1990–1999			
2000–2013			

Reported incidence in TESSy is consistent with this finding, with less than 3 cases per 100 000 since 2006 (Italy_Figure 2).

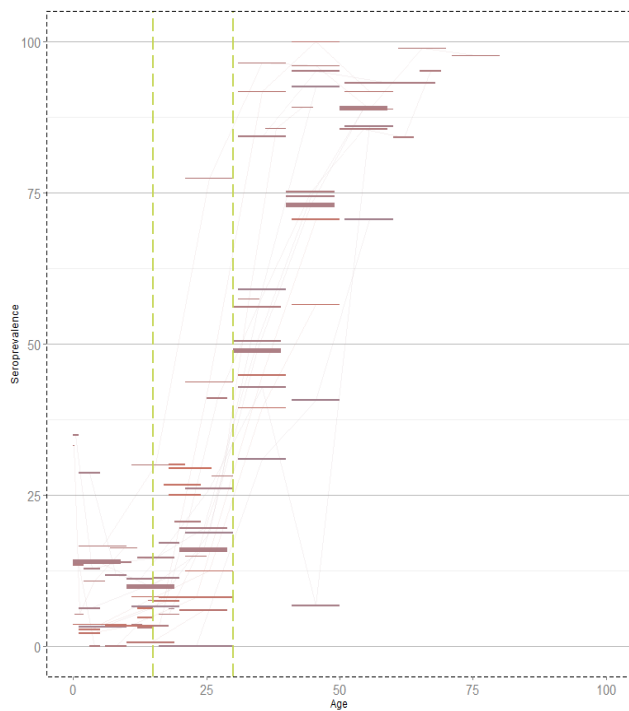
The susceptibility level by 30 years ranges from 80% and above in the Northern regions to around 60% in the Southern regions. Due to the large variability between studies from different regions the assessment of susceptibility among adults may be considered moderate.

Italy_Figure 1 (panel a). Summary of seroprevalence in Italy, by age and time period.

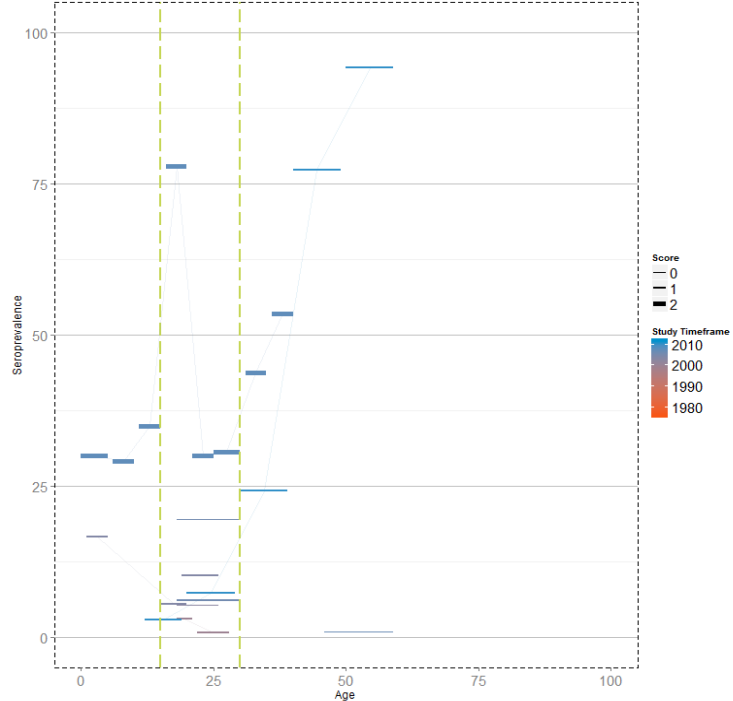
Panel a.1: 1975–1989



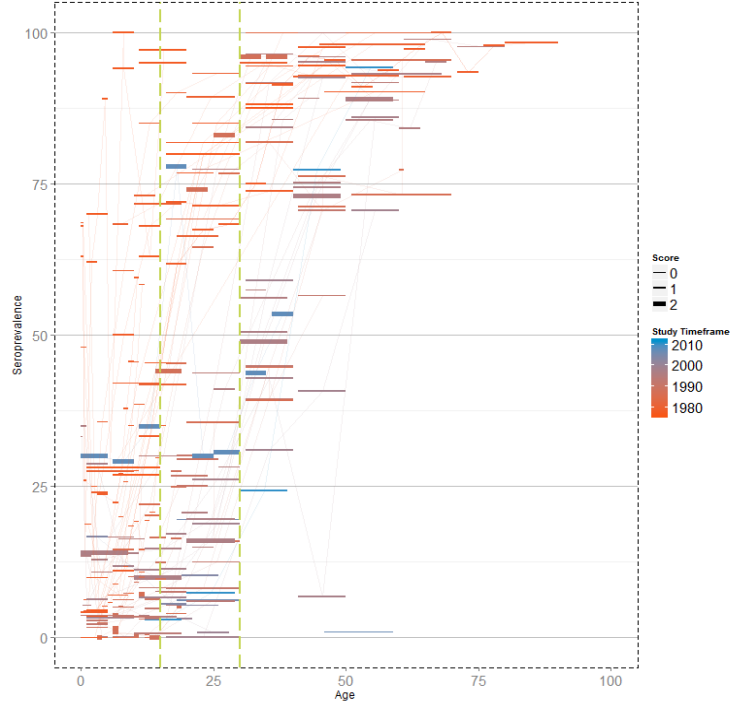
Panel a.2: 1990–1999

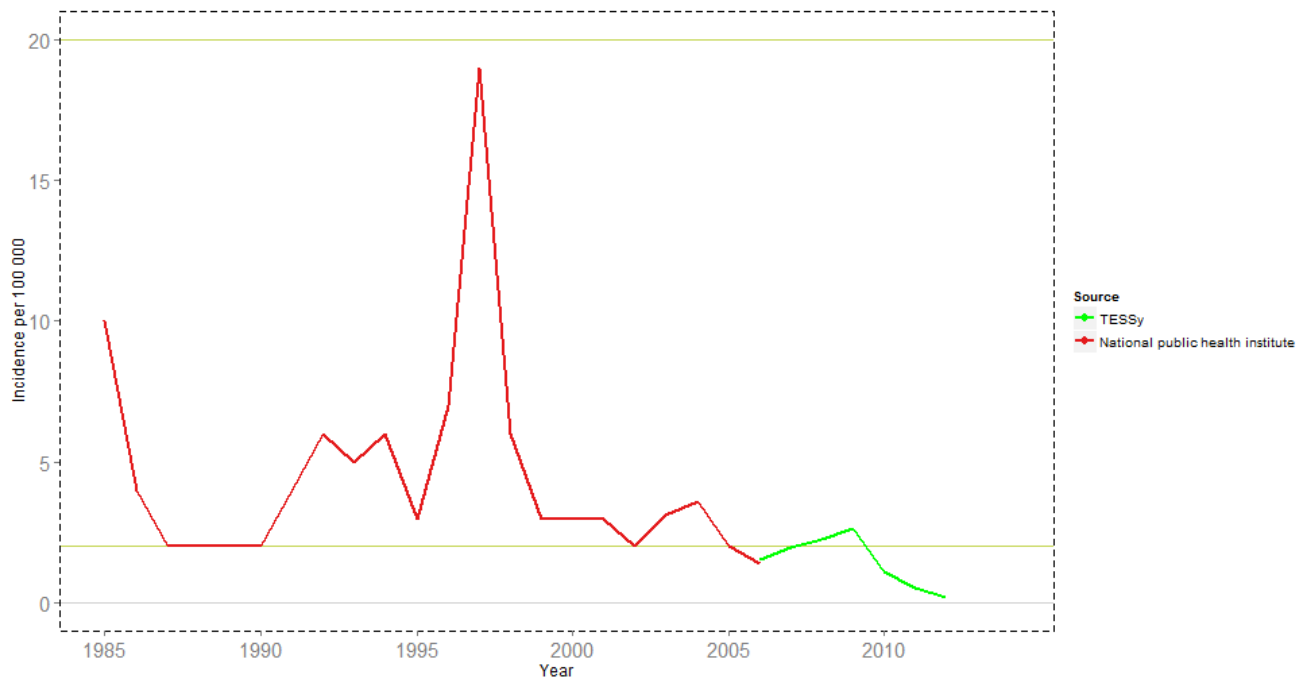


Panel a.3: 2000–2013



Italy_Figure 1 (panel b). Summary of seroprevalence in Italy, by age and time period (1975-2013)



Italy_Figure 2. Reported incidence of hepatitis A, Italy, 1985-2012*

*National data source: www.iss.it

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