

No increase seen in pediatric hepatitis in the United States

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No increase in pediatric hepatitis or adenovirus types 40/41 has been

seen recently in the United States, according to research published in the June 14 early-release issue of the U.S. Centers for Disease Control and Prevention *Morbidity and Mortality Weekly Report*.

Noting that the U.S. Centers for Disease Control and Prevention was notified of a cluster of previously healthy children with hepatitis of unknown etiology in November 2021, and that a health advisory was issued requesting U.S. providers to report pediatric cases of hepatitis of unknown etiology on April 21, 2022, Anita K. Kambhampati, M.P.H., from the CDC in Atlanta, and colleagues analyzed [data](#) from four sources to assess trends in hepatitis-associated emergency department visits and hospitalizations, [liver transplants](#), and adenovirus stool testing results among children in the United States. Data from October 2021 to March 2022 were compared with a prepandemic baseline because of potential changes in [health care](#) seeking behavior during 2020 to 2021.

The researchers found that there was no increase suggested in pediatric hepatitis or adenovirus types 40/41 above baseline levels. Pediatric hepatitis occurred rarely, and the ability to interpret small changes in incidence was limited by relatively low weekly and monthly counts of associated outcomes.

"It remains unknown whether the recently reported cases represent a novel etiology of pediatric acute hepatitis or a previously existing phenomenon that is now being detected," the authors write. "The rarity of this outcome makes it difficult to detect small changes, and pandemic-associated disruptions in health care-seeking behavior and infectious disease epidemiology might still be normalizing."

One author disclosed financial ties to the biopharmaceutical industry.

More information: [Abstract/Full Text](#)

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