SUMMARY AND CONCLUSION

Acute viral hepatitis is a systemic infection affecting the liver predominantly. Almost all cases of acute viral hepatitis are caused by one of five viral agents: hepatitis A virus (HAV), hepatitis B virus (HBV), hepatitis C virus(HCV), the HBV-associated delta agent or hepatitis D virus (HDV), and hepatitis E virus (HEV). All these human hepatitis viruses are RNA viruses, except for hepatitis B, which is a DNA virus.

Hepatitis A Virus (HAV) is transmitted via the orofecal route and has a global distinction. However, the true incidence of hepatitis A is often underestimated because of underreporting as a result of its widely asymptomatic and milder forms of infection. Thus, the epidemiologic pattern of HAV in a given country is indicated primarily by its seroprevalence and only secondarily by disease incidence. The epidemiology of HAV is highly correlated with age and level of hygiene.

Infection of infants and young children with hepatitis B virus represents an important health hazard , since the younger the age at which the infection is acquired the greater the predisposition to the carrier state , chronic liver disease and subsequent development of cirrhosis and hepatocellular carcinoma.

Approximately 20% of Egyptian blood donors are anti-HCV positive. Egypt has higher rates of HCV than neighboring countries as well as other countries in the world.

As HAV ,Hepatitis E, the major form of enterically transmitted non-A, non-B hepatitis, is caused by Hepatitis E Virus (HEV). HEV is transmitted primarily by the fecal-oral route. Hepatitis E virus is responsible for majority of sporadic and epidemic cases of acute viral hepatitis in developing countries.

The aim of this work is to determine the etiology of acute viral hepatitis in most of children patient in Banha fever hospital.

Other causes of acute hepatitis (e.g. drugs, metabolic, protozoa, etc…) will be excluded.

This study was done on 40 cases of Egyptian children taken from Banha fever hospital (24) males ,(16) females.

They were investigated with:

1) **Full detailed medical history.**

2)Full clinical examination. General and systemic examination stressing on manifestations of hepatitis

(jaundice, hepatomegaly ,symptoms and signs of hepatitis).

3)Some liver function tests, including AST and ALT. total bilirubin ,direct bilirubin and indirect bilirubin

4) some viral marker ,HAV IgM. ,HBs Ag. ,HCV Ab. and HBs Ab. by ELISSA if all the above markers be negative the other viral markers as HEV IgM. is the second step.

The results were tabulated and statistically analyzed.

Acute HAV {positive HAV IgM} was diagnosed in 97.5% of total cases thus HAV infection is the still commonest cause of acute hepatitis and acute hepatitis B was diagnosed in 2.5% and no acute hepatitis C was diagnosed.

As regard sex ,and residence in our study there is no significant statistical difference was detected.

No significant difference in clinical manifestation between acute hepatitis types. But From the studied data ,in HAV infection jaundice ,dark urine ,fever ,anorexia, vomiting ,abdominal pain and hepatomegaly were more significant frequent presentation and finding.

SGPT, SGOT and serum bilirubin levels showed a highly significant increase in acute hepatitis .

In conclusion,

The hepatitis A virus still occurs throughout the world, and humans are thought to be its principal host. So it is still the most viral cause of hepatitis in children especially in the developing countries as Egypt.