Hepatitis-B outbreak from acupuncture

Sir,

May I draw the attention of your readers to a recent report (1) of a hepatitis-B outbreak caused by acupuncture. There are clear lessons to be learned.

A 60-year old London woman became jaundiced in 1990 and was diagnosed as having acute hepatitis-B. Questioning revealed only one possible risk factor: recent acupuncture. Environmental health officers inspected the premises but found nothing untoward with sterility procedures: needles were reserved for use by individual patients and autoclaved after use in well maintained apparatus.

In 1992, two more hepatitis-B cases were identified in association with the acupuncture clinic. Serological tests of the acupuncturist himself (by now living in France, having left the clinic) revealed him to be hepatitis-B surface-antigen positive. All patients who had attended the clinic during the time he worked there were sent a letter offering serological testing: 39% responded. Fourteen cases (4% of those tested) were found to have markers for hepatitis-B. Five of these became jaundiced during the relevant period and are almost certain to have contracted the infection at the clinic. Nine others were regarded as unconfirmed since there was no history of jaundice during that time.

At least 2 of the cases could have been caused by cross-contamination from needles as the patients concerned had acupuncture on the same day. The others may have been caused by direct contamination from the therapist since the viral genotypes were indistinguishable. Lapses were then identified in clinic records and in hygiene standards relating to the sterilisation procedure and hand-washing, but despite close questioning of the acupuncturist the actual route of transmission was not identified and the authors reach a tentative conclusion that viral particles from lesions on his hands may have contaminated needles before insertion.

Previous hepatitis outbreaks associated with acupuncture have been due to inadequate sterilisation: this is the first outbreak identified to be due to treatment by a practitioner who is a hepatitis-B carrier. The authors conclude that not only should sterile, single-use disposable needles be regarded as essential, but also that all acupuncturists should be immunised against hepatitis-B, both for their own protection and for that of their patients and family.


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