**Research in context**

**Hepatitis E Virus: Western Cape, South Africa**

**- Evidence before this study**

Hepatitis E virus (HEV) is an important cause of enterically transmitted hepatitis worldwide. In developing countries waterborne HEV genotypes 1 and 2 are endemic. In contrast, in developed countries HEV genotypes 3 and 4 are endemic, and are considered enzoonotic with pigs as the primary host. They cause acute infection, and chronic infection with rapidly progressive cirrhosis in the immunosuppressed. Limited data exists about hepatitis E in South Africa. Previous studies date from the 1990’s and were flawed as they employed first generation assays of poor sensitivity (pubmed search terms Hepatitis E, HEV, seroprevalence, South Africa: 1980-date; no language restriction).
 **- Added value of this study**

HEV is endemic in the Western Cape, South Africa with a seroprevalence of 29.1% (21.9% age-adjusted) and is similar in three major ethnic groups, both HIV positive and negative individuals. Seroprevalence in children is low but rapidly increases in early adulthood. The single risk factor for seropositivity in multivariate analysis is pork consumption [OR 2.052(1.39-3.03), p<0.001]. The clinical case demonstrates that HEV genotype 3 is currently circulating in the Western Cape.

**- Implications of all the available evidence**

HEV is endemic in the Western Cape, and the epidemiology appears to be similar to that in developed countries, as seropositivity is related to pork consumption and HEV genotype 3 is currently circulating in the community. Clinicians in South Africa should have a low threshold for testing for HEV in patients with unexplained acute hepatitis and excluding chronic infection with HEV in the immunosuppressed, including transplant recipients and individuals with HIV.