

(b)Mule deer

A Case of Acute Hepatitis E Infection Associated with Deer Meat in the U.S.A.

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History

- No pedal

Labs

Laboratory Alkaline P Alanine Tra Aspartate Total Bili: Albumin, m Hepatitis Hepatitis

Patient immune to HAV and non-immune to HBV and HCV. Autoimmune serologies negative.

- collection

CASE PRESENTATION

• A 53-year-old female with hyperlipidemia • One week prior to presentation with worsening epigastric pain, nausea and vomiting, fatigue, and intermittent fevers patient was butchering deer. • She smoked 10 cigarettes/day regularly, and drank 1-2 drinks once or twice per month. • She had no known allergies. Physical Examination

• Mild scleral icterus • Mild epigastric tenderness • No hepatomegaly, spider nevi, telangiectasia, or caput medusa

1	edema
	Cuenta

Test	Results	Reference Range
hosphatase, IU/L	262	45-115
ansaminase, IU/L	2365	7-35
Transaminase, IU/L	1107	14-41
rubin, mg/dL	2.6	0.4-1.4
g/dL	2.9	3.3-5.0
E Ab IgM	Detected	Not Detected
E Ab IgG	Detected	Not Detected

Abdominal Ultrasound

• Liver was homogenous in echotexture with no steatosis or suspicious mass • Gallbladder was normal with no wall thickening, or pericholecystic fluid • No intrahepatic or extrahepatic biliary ductal dilatation

- Intravenous fluids
- Analgesic therapy

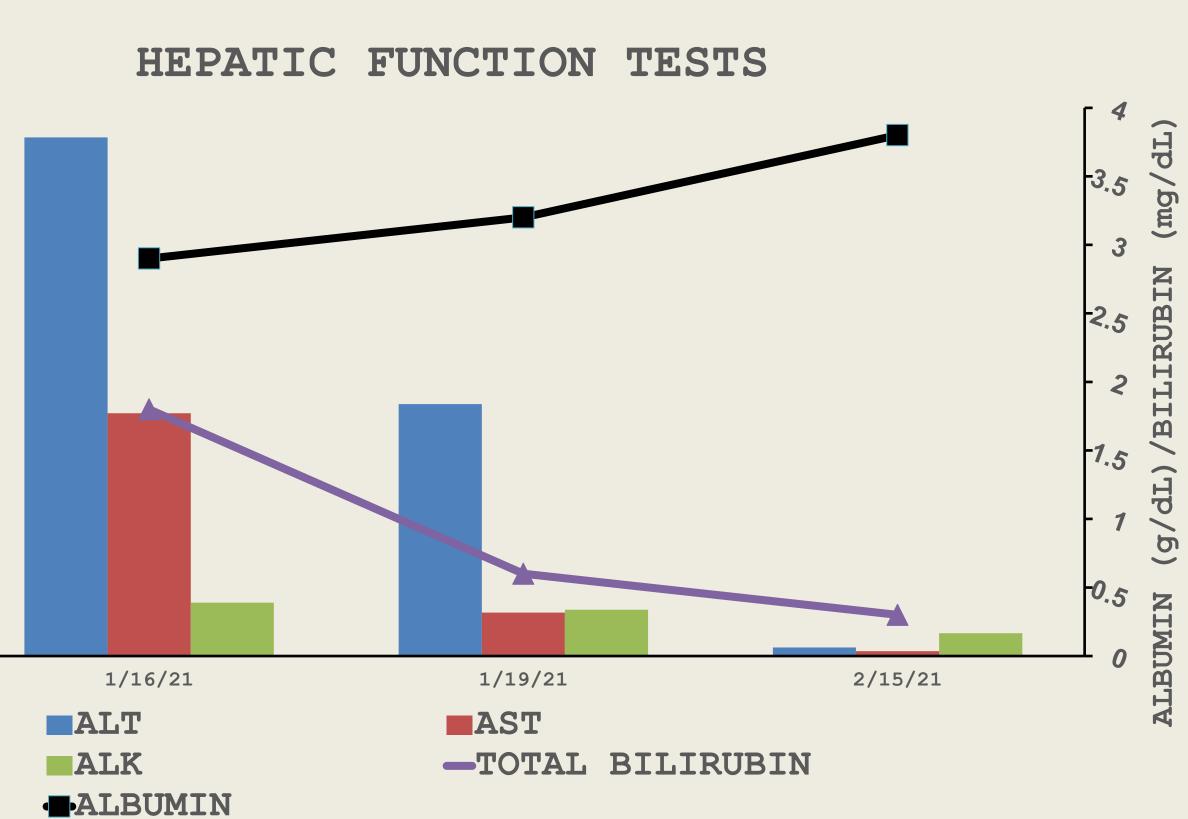


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CLINICAL COURSE

- Supportive Therapy
- No antiviral medication given



CONCLUSIONS

This case confirms deer as a vector for the transmission of HEV to humans in the U.S. HEV transmission from deer meat to humans has been reported in Japan with the consumption of raw venison. We note the proximity of Wisconsin to Canada. While the seroprevalence of HEV among deer in Canada has been estimated to range from 3.2-8.8%, the HEV RNA itself has not been detected in the animals.

REFERENCES

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