found was the mean age of patients with or without previous hepatitis A that was 46.2 and 24.1 years, respectively (*p* < 0.05), which illustrates once again the lower prevalence in younger people, a fact that is also stressed in their article.¹

Nevertheless, there is a considerable difference in hepatitis A prevalence between our studies, which may be related to the various ethnicities of patients attended at ou Hospital, since at least the mean age of patients in our studies is quite similar.

Just like our colleagues, we share the concerns around the implications that this higher lack of immunity to hepatitis A could have in the nearby future.

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Joana Carvalho e BRANCO⊠¹, Sara Folgado ALBERTO¹, Alexandra MARTINS¹

- Serviço de Gastrenterologia. Hospital Professor Doutor Fernando Fonseca. Amadora. Portuga
- Autor correspondente: Joana Carvalho Branco. cbranco.joana@gmail.com

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Letter to the Editor: The Clear and Present Danger to Portuguese Travelers to the Middle East Region

Carta ao Editor: O Perigo Claro e Presente para os Portugueses que Viajam para o Médio Oriente

Keywords: Hepatitis A; Hepatitis A Antibodies; Hepatitis A Virus, Human; Portugal; Seroepidemiologic Studies; Travel; Travel Medicine; Viral Vaccines

Palavras-chave: Anticorpos Anti-Hepatite A; Estudos Seroepidemiológicos; Hepatite A; Medicina do Viajante; Portugal; Viagem; Vírus da Hepatite A Humana

I read with interest the recently published article by Rocha *et al*¹ in your esteemed journal. As the authors mentioned, the prevalence of hepatitis A virus (HAV) infection decreased in young adults in Portugal and we have similar data from other parts of the world too.^{2,3} The prevalence of HAV infection differs greatly in various parts

of the world depending on the geographic area, sanitary conditions and socioeconomic levels. There are several reports about a shifting epidemiological pattern of HAV from high prevalence to lower endemicity as a result of improved living conditions all over the world, even in developing countries.4 The most frequent travel destination in Rocha et al1 was sub-Saharan Africa and around 50% of travelers under 50 years old susceptible to hepatitis A virus infection required HAV vaccination before travelling to high endemicity areas for HAV infection. I would like to mention that nobody should forget the Middle East area with many conflicts such as wars, floods and crisis that can affect the access to safe water and proper disposal of wastes. The tourists from western countries with low endemicity for HAV infection should receive HAV vaccine and be more aware of good practices in safe water drinking in the Middle East region.3,5

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Seyed Moayed ALAVIAN⊠¹

1. Baqiyatallah Research Center for Gastroenterology and Liver Diseases (BRCGL). Baqiyatallah University of Medical Sciences. Tehran. Islamic Republic of Iran. Autor correspondente: Seyed Moayed Alavian. alavian@thc.ir

