Insights into the spatial epidemiology of Hepatitis C infection: Systematic synthesis of Area-Level Determinants and Spatiotemporal Analyses

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Area-level determinants significantly shape the risk environment for HCV infection, with socioeconomic factors emerging as a central theme in contemporary HCV epidemiological research

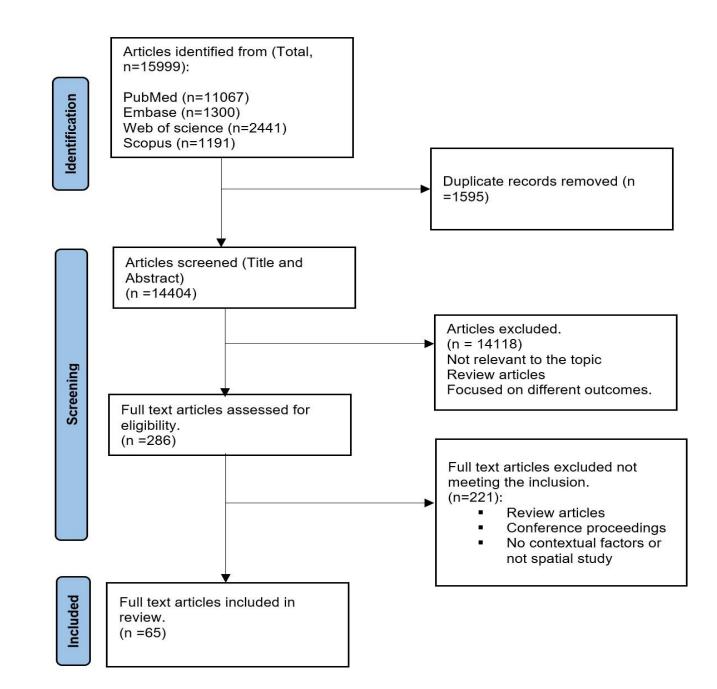
BACKGROUND

Hepatitis C virus (HCV) stands at the forefront of global elimination endeavors by 2030. Effective elimination necessitates a comprehensive investigation into the disparities and vulnerabilities of diverse communities through an innovative spatial epidemiological lens.

This systematic review sought to synthesize the area-level determinants of HCV infection elucidated in extant literature and summarize the application of spatial and spatiotemporal analyses in hepatitis C research.

METHODS

Following the Preferred Reporting Items for Systematic Reviews and Meta-analyses (PRISMA) guidelines, a comprehensive search of peer-reviewed literature from the period 2000 to 2023 was performed using the PubMed, Web of Science, Scopus, and Embase databases.



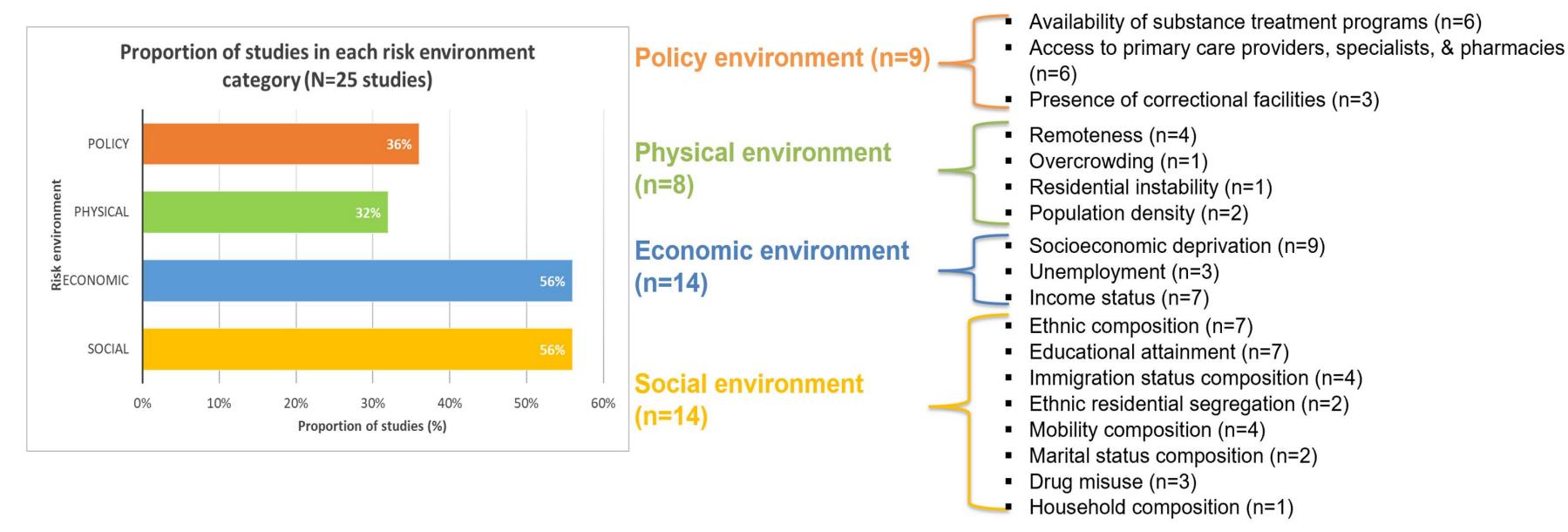
Flow chart of selected studies

RESULTS

Category	Number of Studies (total=65)	%
Study design		
Cross-sectional	61	93.8
Cohort/longitudinal	4	6.2
Study population		
The general population	39	60.0
People who inject drugs	13	20.0
WHO regions		
African	3	4.6
Americas	31	47.7
European	6	9.2
South-East Asia	2	3.1
East Mediterranean	4	6.2
Western Pacific	19	29.2
Level of analysis		
Individual	5	7.7
Ecologic	46	70.8
Multilevel	14	21.5
Geographic unit of aggregation		
County	14	21.5
Province	7	10.8
ZIP code	3	4.6
District	5	7.7
Census tract	7	10.8
HCV-related outcome		
Prevalence (seroprevalence)	30	46.2
Incidence	22	33.8
Mortality rate	3	4.6

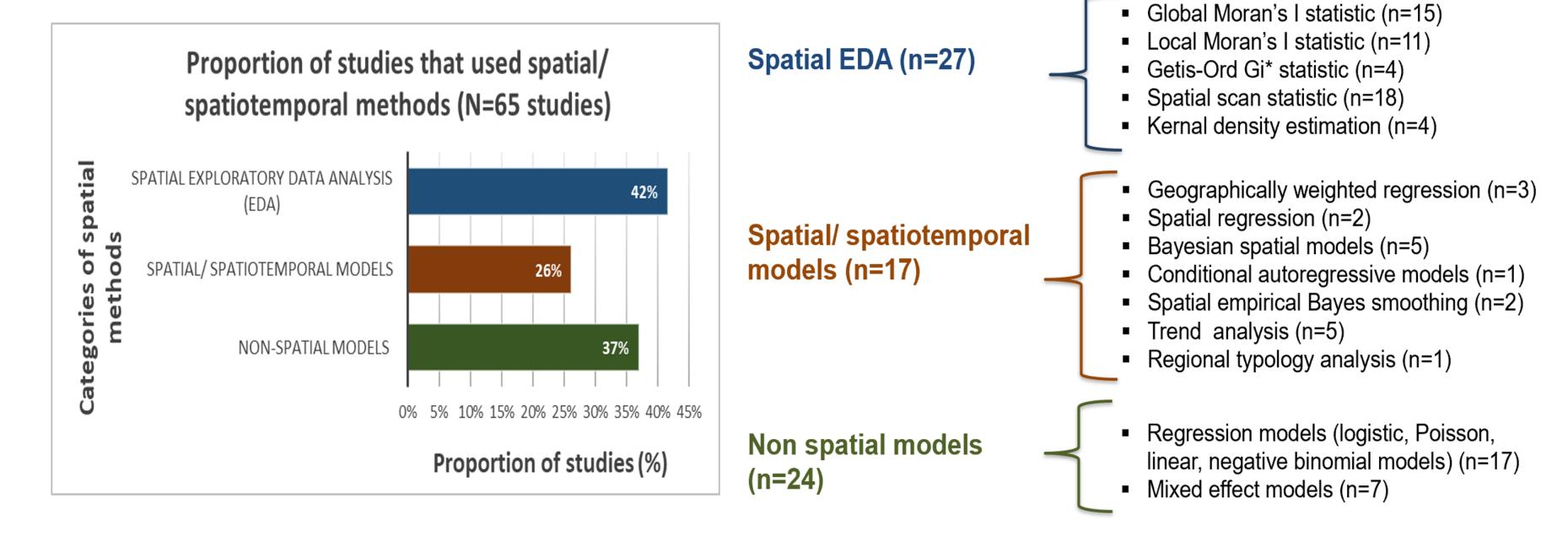
Summary characteristics of the selected studies

RESULTS CONTINUED



Summary of the area-level factors highlighted in hepatitis C studies: categorized according to the risk environment type.

- 25 studies out of 65 reported area-level factors of importance in hepatitis C-related outcomes.
- The predominantly explored area-level factors were characteristics of the social and economic risk environments.



Summary of geospatial and non-spatial methods applied in hepatitis-C-related

- Spatial exploratory data analysis (EDA) methods were the predominantly employed methods.
- The application of spatial EDA methods was primarily for visualizing and exploring patterns of HCV occurrence.
- Spatial and spatiotemporal models were less commonly utilized in the analysis of HCV data. When employed, these models were mainly used to investigate area-level determinants of HCV occurrence and small-area disease estimation.

CONCLUSIONS

- The findings underscore the crucial importance of unraveling the intricate interplay of area-level factors in shaping the risk environment of HCV infection.
- A comprehensive understanding of the potential risk environment landscape of HCV could assist in identifying vulnerable areas and communities, thus facilitating targeted interventions aimed at eliminating HCV.
- The underutilization of geospatial models in HCV research underscores a notable methodological gap that warrants attention, particularly because they are significant in informing geographically targeted public health interventions.

ADDITIONAL KEY INFORMATION

