

Special Issue

Hepatitis E Virus and Immunology Research

Message from the Guest Editor

HEV is the most common cause of acute viral hepatitis worldwide. Improvements in diagnostic algorithms based on serological and molecular tools are associated with a dramatic increase in the number of cases of HEV infection reported to public health authorities. HEV can take different transmission routes depending on the genotype. HEV-1 and HEV-2 are predominant in countries with limited resources, where they are transmitted via contaminated water, while HEV-3 and HEV-4 are predominant in the other countries, where they are transmitted from a large animal reservoir, mainly pigs. HEV-1 can result in fulminant hepatic failure and severe placental disease in pregnant women. We now know that only HEV-3 and HEV-4 can produce chronic hepatitis E in immunocompromised individuals. Furthermore, extra-hepatic manifestations such as neurological and renal manifestations are increasingly being reported. The mechanisms responsible for the variety of clinical manifestations of HEV infection remain poorly characterized. This Special Issue of *Vaccines* is dedicated to our current knowledge of HEV and future directions of research on HEV vaccines.

Guest Editor

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About the Journal

Message from the Editor-in-Chief

Vaccines (ISSN 2076-393X), founded in 2013, now has a firm history of publishing peer-reviewed, state-of-the-art research papers on vaccines and vaccination in the broadest sense. Areas covered include, but are not limited to, novel and emerging vaccine technologies, building on in-depth knowledge of what constitutes a protective immune response. These can be new vaccines for old diseases, or old vaccines for new diseases. Vaccines against cancer and autoimmune diseases explicitly are also within the scope of the journal. Because public opinion and even government policies towards vaccines and vaccination have changed, vaccine policy and public health issues are major concerns. Climate change will also have an impact on the spread of infectious diseases, and thus also on vaccine and vaccination policies worldwide.

Editor-in-Chief

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manuscripts are peer-reviewed and a first decision is provided to authors approximately 17.5 days after submission; acceptance to publication is undertaken in 2.8 days (median values for papers published in this journal in the first half of 2026).