Hepatitis A Fact Sheet for Healthcare Providers

Background
The Ohio Department of Health Bureau of Infectious Diseases has seen an increase in hepatitis A infections in 2018. As of May 29th, there have been 68 confirmed cases reported in 2018. Hepatitis A is primarily transmitted by the fecal-oral route. Populations currently included in these cases include men who have sex with men and people who use drugs. Some cases have also been reported among people who are incarcerated and people experiencing homelessness. Lessons learned from neighboring states experiencing hepatitis A outbreaks have shown that vaccination of high risk populations is a highly effective approach to reducing hepatitis A transmission. Coordination between health care and public health can reduce infections by improving hepatitis A response and prevention activities. This fact sheet has been developed for healthcare providers to answer common questions about hepatitis A.

Who should be vaccinated for hepatitis A?
Hepatitis A vaccination is part of the routine childhood immunization schedule in a two-dose series starting at 12 months of age. In addition, the Advisory Committee on Immunization Practices (ACIP) recommends vaccination for the following populations:

- Men who have sex with men
- Users of injection and non-injection drugs
- Persons with chronic liver disease (including hepatitis B or C)
- Persons traveling to or working in countries with high or intermediate hepatitis A endemicity
- Persons who work with hepatitis A virus in a research laboratory or with non-human primates
- Persons with clotting-factor disorders
- Persons who anticipate close, personal contact (e.g., household or regular babysitting) with an international adoptee during the first 60 days after arrival in the United States from a country with high or intermediate endemicity

How can I help prevent an outbreak in Ohio?
Vaccination of high risk populations has been important in stopping outbreaks and could be key to preventing an outbreak from occurring in Ohio. At least 1 in 5 patients diagnosed with hepatitis A in Ohio this year have been co-infected with hepatitis C. As recommended by ACIP (see above), patients with chronic hepatitis B and C should be vaccinated for hepatitis A.

What are the symptoms of hepatitis A?
Symptoms usually include fever, malaise, jaundice, anorexia, nausea, abdominal pain, dark urine.

How long does it take to show symptoms?
Symptom usually occur between 15 and 50 days after exposure (28 days on average).

When does transmission occur?
Patients are considered infectious from two weeks before onset of jaundice until 10 days after onset of jaundice. Transmission occurs through virus shed in the stool.
What should I do if I diagnose a patient with hepatitis A?
In addition to your routine care of the patient, please also consider the following:

- Hepatitis A is a reportable Class B disease in Ohio. Please contact your local health department to report a new diagnosis of hepatitis A.
- Ask about close contacts in the 14 days before jaundice onset. Close contacts include household contacts, sexual contacts, drug sharers, and childcare center staff and attendees. As a healthcare provider, you might have the only opportunity to ask about close contacts.
- Ask about risk factors for acquiring infection including sexual contact, drug use, homelessness, and recent travel outside of Ohio.

Why is it important to ask about close contacts?
The local health department can follow-up with close contacts and offer post-exposure prophylaxis to prevent new cases. Post-exposure prophylaxis can be given within 14 days of last exposure.

Why is it important to ask about risk factors?
Understanding risk factors of people diagnosed with hepatitis A helps local and state health departments to understand which populations have an increased risk. This allows us to design targeted messaging and vaccination strategies to prevent additional illness.

How can hepatitis A transmission to healthcare workers be reduced?
Contact protections (e.g. gown, gloves) in addition to standard precautions (e.g. handwashing) are recommended when providing care to patients who are diapered or incontinent for at least 10 days after jaundice onset. Post-exposure prophylaxis is not routinely indicated for workers who have provided care for a patient with hepatitis A.

Additional Resources
CDC Hepatitis A Questions and Answers for Health Professionals
https://www.cdc.gov/hepatitis/hav/havfaq.htm#E1

Prevention of Hepatitis A Through Active or Passive Immunization: Recommendations of the Advisory Committee on Immunization Practices (ACIP)
https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5507a1.htm