

# PUBLIC HEALTH REFERENCE SHEET

## Hepatitis A



<b>Name</b>	Hepatitis A virus
<b>Reservoir &amp; Transmission</b>	Humans Person-to-person by fecal-oral route
<b>Incubation Period</b>	Average 28–30 days. Range 15–50 days.
<b>Common Symptoms</b>	Jaundice, elevated liver function levels, fatigue, nausea
<b>Gold Standard Diagnostic Test</b>	Detection of IgM antibodies
<b>Risk Groups</b>	Children, close personal contacts, men who have sex with men, recreational drug users
<b>Geographic Significance</b>	Worldwide

### What is hepatitis A?

Hepatitis A is an acute and contagious vaccine-preventable infection of the liver caused by the hepatitis A virus (HAV).

### What is the occurrence of hepatitis A?

In the U.S., a vaccine was licensed in 1995. Since 2016, the U.S. experienced hepatitis A outbreaks in multiple states that were caused by person-to-person spread primarily among adults who use drugs and experience homelessness. From 2020 to 2021, there was a 43% decrease in incidence. However, the number of cases reported in 2021 remains 4 times higher than in 2015.

### How is hepatitis A transmitted?

Hepatitis A is transmitted through the fecal-oral route. This can happen through close person-to-person contact with an infected person, sexual contact with an infected person, or ingestion of contaminated food or water. A person can transmit the virus to others up to 2 weeks before symptoms appear. Although viremia occurs early in infection, bloodborne transmission of hepatitis A virus is uncommon. The hepatitis A virus can live outside the body for months, depending on the environmental conditions.

### Who is at risk for hepatitis A?

Although anyone can get hepatitis A, people at increased risk for HAV infection include:

- Travel to or live in countries where hepatitis A is common
- Men who have sexual contact with other men
- Use illegal drugs, whether injected or not
- Have occupational risk for exposure
- Experience homelessness
- Close contact with an international adoptee

People at increased risk for severe disease from HAV infection include those with chronic liver disease and those with human immunodeficiency virus (HIV) infection.

### What are the signs and symptoms of hepatitis A?

Adults are more likely to have symptoms than children. Most (70%) of infections in children younger than age 6 are not accompanied by symptoms. When symptoms are present, young children typically do not have jaundice, whereas most (>70%) older children and adults with HAV infection do have jaundice. If symptoms occur, they usually start appearing 4 weeks after exposure, but can occur between 2 and 7 weeks after exposure. Symptoms usually last less

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than 2 months, although some (about 10–15% of cases) can be ill for as long as 6 months. Hepatitis A causes an acute illness with a discrete onset of any of the following: fever, headache, malaise, anorexia, nausea, vomiting, diarrhea, or abdominal pain, as well as either of the following: jaundice or elevated total bilirubin levels  $\geq 3.0$  mg/dL or elevated serum alanine aminotransferase (ALT) levels  $> 200$  IU/L.

### What are potential complications of hepatitis A?

For symptomatic cases, severity can range from a mild illness lasting a few weeks to a severe illness lasting several months. Most people infected with hepatitis A recover completely and do not have lasting liver damage. In rare cases, notably among older people and those with serious health issues like chronic liver disease, hepatitis A can cause liver failure and death.

### How is hepatitis A diagnosed?

A case that is epidemiologically linked to a laboratory-confirmed case 15 to 50 days before the onset of symptoms may confirm diagnosis in the absence of laboratory testing. Confirmatory laboratory evidence is Immunoglobulin M (IgM) antibody to hepatitis A virus (anti-HAV) positive, or Nucleic acid amplification test (NAAT; such as polymerase chain reaction [PCR] or genotyping) for hepatitis A virus RNA positive.

### How is hepatitis A treated?

Unvaccinated people who have been exposed recently (within 2 weeks) to the hepatitis A virus should get the hepatitis A vaccine or immune globulin to prevent severe illness. Treatment is primarily supportive to include rest, adequate nutrition, and fluids. Post exposure prophylaxis (PEP) should be considered for all previously unvaccinated residents and employees when a confirmed hepatitis A case occurs, within a setting where close personal contact occurs regularly and hygiene standards are difficult to maintain (e.g., correctional facility, homeless shelter, psychiatric facility, group home or residential facility for the disabled). In a setting containing multiple enclosed units or sections (e.g., prison ward), PEP administration should be limited only to people in the area where there is exposure risk.

### How can hepatitis A be prevented?

Vaccination with the two-dose series of hepatitis A vaccine is the best way to prevent infection. The number and timing of doses depends on the type of vaccine. Hand hygiene, including thoroughly washing hands after using the bathroom, changing diapers, and before preparing or eating food is important to prevent the spread of hepatitis A.

The hepatitis A vaccination is recommended for—

- All children 12–23 months of age.
- Unvaccinated children 2–18 years of age.
- Travelers to countries that have high rates of hepatitis A.
- Men who have sexual contact with other men.
- Users of injection and non-injection illegal drugs.
- People experiencing homelessness.
- People with chronic liver diseases, such as hepatitis B or hepatitis C.
- People with HIV infection.
- People who work with Hepatitis A infected animals or in a hepatitis A research laboratory.
- Any person wishing to obtain immunity.

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Certain groups are at low risk and do not need routine vaccination against hepatitis A. These groups include people with clotting factor disorders, food handlers, workers exposed to sewage, healthcare personnel, and childcare center staff.

### What are some public health considerations?

- Positive hepatitis A total antibody tests are commonly found in electronic health records, DO NOT meet this case definition, and are NOT reportable.
- Positive hepatitis A IgM results without symptoms do not meet this case definition and are NOT reportable.
- Document relevant travel and deployment history occurring within the incubation period (15–50 days).
- Document if the case patient works in, lives in, or attends a high-transmission setting such as food handling, daycare, school, group living, health care, training center, or ship.
- Note the patient’s hepatitis A immunization history.

### References:

Defense Health Agency. 2022. *Armed Forces Reportable Medical Events: Guidelines and Case Definitions*.

<https://www.health.mil/Reference-Center/Publications/2022/11/01/Armed-Forces-Reportable-Medical-Events-Guidelines>

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<https://www.cdc.gov/hepatitis/hav/havfaq.htm#general>

Heymann, David L. ed. 2022. *Control of Communicable Diseases Manual*. 21st Edition. Washington, DC: APHA Press.

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