

## Recommendations for Providers during the Current Hepatitis A Outbreak

The Kentucky Department for Public Health (DPH) has declared an outbreak of acute Hepatitis A (HAV) with cases in multiple counties in Kentucky.

As of November 28, 2017 there had been 23 confirmed cases of acute Hepatitis A in Louisville, 21 of them since August 1. This compares to an average of one case of acute hepatitis A in Louisville per year for the past five years. While the current outbreak has centered in the homeless and people who use illicit drugs, others without these risk factors have been infected as well.

Hepatitis A is a viral infection of the liver. Transmission occurs via the fecal-oral route. Hepatitis A virus leaves the body through the stool of the infected person, and enters another person when hands, food, or objects are contaminated with stool, and are placed into the mouth. Infection can also occur through ingestion of Hepatitis A contaminated food or drink.

Symptoms vary greatly, from severe to none at all. Symptoms may include loss of appetite, nausea, tiredness, fever, stomach ache, dark colored urine, and light colored stools. Jaundice may appear a few days after the onset of these symptoms. Incubation period is 2 to 6 weeks.

### Recommendations for Providers:

**1. Consider HAV infection** in individuals, especially the homeless and those who use illicit drugs, with discrete onset of symptoms (e.g., nausea, vomiting, diarrhea, anorexia, fever, malaise, dark urine, light-colored stool, or abdominal pain), and jaundice or elevated liver function tests. Test those suspected of having HAV with Hepatitis A IgM antibody.

**2. Promptly report all confirmed and suspect HAV cases.** Providers should report all HAV cases within 24 hours to the Louisville Metro Department of Public Health and Wellness by fax at 502-574-5865 or by phone at 502-574-6675. Please use the EPID200 form found [here](#).

- Patient's demographics (patient name, date of birth, gender, race, ethnicity, patient address, county of residence, patient telephone number)
- Name, address, and telephone number of reporting facility or provider
- Laboratory information (including faxed lab results and sources of specimens submitted for laboratory testing)
- Clinical and epidemiological information pertinent to disease

Since this outbreak involves homeless individuals, providers are urged to contact the Louisville Metro Department of Public Health and Wellness while suspected cases are still at the healthcare facility. This action will ensure that a public health investigator can interview the patient by phone for a risk history

and will facilitate serum or stool specimen submission to the Kentucky State Public Health Laboratory for possible genotyping

**3. Provide post-exposure prophylaxis (PEP) for close contacts of confirmed HAV cases.** Susceptible people exposed to hepatitis A virus (HAV) should receive a dose of single-antigen HAV vaccine or intramuscular (IM) immune globulin (IG) (0.02 mL/kg), or both, as soon as possible within 2 weeks of last exposure. The efficacy of combined HAV/Hepatitis B virus (HBV) vaccine for PEP has not been evaluated, so it is not recommended for PEP.

**4. Provide HAV vaccine to homeless individuals and illicit drug users who are not already immunized.** The combined HAV/HBV vaccine may be used in this group if the individual is not already immune to HBV. Providers who do not have available vaccine may direct patients to the Louisville Metro Department of Public Health and Wellness at 400 E. Gray St.

**5. Provide HAV vaccine to unimmunized school age children.** Effective July 1, 2018 all Kentucky students in kindergarten through twelfth grade must show proof of having received two doses of Hepatitis A vaccine to attend school. Providers should begin providing these immunizations to their patients.