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Update: Hepatitis A Virus Outbreak

Guidance for Health Care Providers

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From August 1, 2016 through present the Hepatitis A outbreak, which originated in SE Michigan, has spread and includes 677 confirmed cases, resulting in 554 hospitalizations and 22 deaths, statewide, and now includes Northern Michigan. **In December 2017, Grand Traverse County had 3 cases of Hepatitis A and there has been a recently confirmed case in both Leelanau and Montmorency County.** The outbreak strain (genotype 1b) that has affected Michigan has carried a much higher morbidity and mortality than typically seen with Hepatitis A infection with a hospitalization rate of over 80%.

Hepatitis A is a highly contagious, vaccine-preventable liver infection. The infection is primarily spread from person-to-person through ingestion of food, water, or oral contact with objects (including hands) contaminated by feces of a Hepatitis A-infected individual. Transmission occurs easily among sexual and close household contacts, and persons sharing needles and non-injection drugs. The incubation period is long (15-50 days) and transmissibility begins many days before the onset of any symptoms. Though sometimes asymptomatic, typical Hepatitis A symptoms include fever, fatigue, nausea, vomiting, abdominal pain, appetite loss, jaundice, dark urine, and pale stools. Hepatitis A infection may last a few weeks to several months. Some individuals, especially if co-infected with Hepatitis B or C, may develop fulminant liver failure resulting in death.

While the Hepatitis A vaccine is now recommended as a part of the routine childhood vaccination schedule, many adults have not been vaccinated and may be susceptible to the Hepatitis A virus. Hepatitis A vaccine is available at the Health Department clinics as well as many local provider offices and pharmacies. The following populations are at increased risk of infection or morbidity and should be vaccinated with Hepatitis A Vaccine (HAV):

- Persons who are homeless
- Persons who are incarcerated
- Persons who use illegal drugs both injection and non-injection
- Persons who have close or sexual contact, care for, or live with someone who has HAV
- Men who have sex with men
- People who participate in commercial exchange of sexual practices
- Travelers to countries with high or medium rates of HAV
- Persons with chronic liver disease, such as cirrhosis, hepatitis B, or hepatitis C
- Persons with clotting factor disorders

Clinicians are also reminded to consider Hepatitis A as a possible diagnosis when evaluating patients whose symptoms are consistent with the virus. Diagnosis is generally confirmed by a positive test for Hepatitis A IgM. **Suspect cases should be reported to the local health department** (contact the CD Nurse or local county office).

Please report Hepatitis A infections when you first suspect it so that a case investigation can begin immediately. Since post exposure prophylaxis (generally with Hepatitis A Vaccine) is time sensitive, it is not necessary to wait for lab confirmation before reporting.

Because hepatitis A can have serious health consequences, the CDC recommends providing post exposure prophylaxis (PEP) for all unvaccinated contacts who have been exposed in the last two weeks. PEP consists of:

- Single-antigen hepatitis A vaccine at the age appropriate dose for healthy people between the ages of 1 and 40 years.
- Immune globulin (IG) (0.1 mL/kg) for people younger than 1 or older than 40 years of age, those who are immunocompromised and those whom vaccine is contraindicated.
- If immunoglobulin is not available, hepatitis A vaccine can be substituted for those 41-74 years
- People with high risk indications should receive both IG and HAV. This includes pregnant women and persons who have chronic liver disease or are immunocompromised.

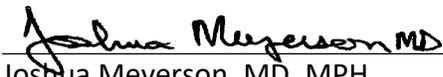
For more information regarding hepatitis A and the current outbreak:

<http://michigan.gov/hepatitisAoutbreak>

<https://www.cdc.gov/hepatitis/hav/index.htm>

http://www.michigan.gov/documents/mdhhs/Hepatitis_A_Interim_Guidance_for_IG_Use_Final_12.5.17_608040_7.pdf

Thank you for being part of the collective effort to inform, educate, and protect our community. You can contact me with any questions or concerns at 231-547-7679 or J.Meyerson@nwhealth.org



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