

Hot Tips

A Service of Ventura County Public Health

RIGOBERTO VARGAS, MPH, DIRECTOR

ROBERT M. LEVIN, MD, HEALTH OFFICER HOT TIPS #94 DATE 10/10/2017

Please copy and distribute to ALL physicians at your location.

<u>Update on the Ongoing Hepatitis A Outbreak in Some California Counties</u>

Detection and Prevention of Hepatitis A Disease

Key Messages:

- Hepatitis A virus (HAV) outbreaks in persons who are homeless and/or use illicit (injection
 and non-injection) drugs are currently occurring in San Diego, Los Angeles, and Santa Cruz
 counties and have the potential to spread to Ventura County.
- In these outbreaks, HAV is primarily being transmitted person-to-person through close contact or through contact with a fecally contaminated environment.
- Timely identification and reporting of confirmed and suspect hepatitis A cases is critical for an effective public health response and to guide outbreak prevention strategies.
- To prevent an outbreak in Ventura County, HAV vaccine is recommended for people who are homeless and/or use illicit drugs.

Current Situation:

Hepatitis A outbreaks are currently ongoing in San Diego, Los Angeles, and Santa Cruz counties in persons who are homeless and/or using illicit drugs. Cases also have occurred among persons who provide services to the homeless population in these counties. In San Diego County, as of September 26, there have been 461 cases and 17 deaths. In Santa Cruz County, since April of 2017 there were 71 cases that were confirmed. Cases in both counties are caused by the same genetic strain of hepatitis A virus (HAV). On July 13, 2017, the California Department of Public Health issued a Clinical Advisory, 'Immunize to Prevent and Control Hepatitis A Outbreaks', describing the outbreaks and presenting recommendations for prevention. It is unknown how long the outbreaks in San Diego, Santa Cruz, and Los Angeles counties will continue, but information on the current epidemiology of these outbreaks as well as similar experiences in other communities suggest these may continue for months, perhaps longer than a year.

Ventura County Public Health (VCPH) is also reaching out to organizations that provide services to homeless individuals to share information about the outbreaks and to encourage and support vaccination of the organization employees and volunteers as well as their clients.

Actions Requested of Providers:

Suspect HAV infection in patients who are homeless/recently homeless and/or who use illicit drugs who
have abrupt onset of prodromal symptoms (nausea, anorexia, fever, malaise, or abdominal pain) and
jaundice, light-colored stool or elevated serum aminotransferase levels. A complete serology panel with
testing for hepatitis A (order HAV IgM), B, and C is recommended in symptomatic patients. HIV testing
is also recommended for those with an undocumented HIV-status. Do not test asymptomatic people for
HAV infection.

- Promptly report all confirmed and suspect HAV cases to Ventura County Communicable Disease Office
 by faxing a Confidential Morbidity Report (CMR) to 805-981-5200 or by calling 805-981-5201. Copies of
 pertinent laboratory testing results and clinical notes should be included. Providers are urged to report
 while suspected cases are still at the healthcare facility to facilitate immediate interview by a public
 health investigator.
- Provide post-exposure prophylaxis (PEP) for close contacts of confirmed HAV cases as directed by the public health department. Susceptible people exposed to HAV should receive PEP as soon as possible within 2 weeks of last exposure. Single-antigen HAV vaccine and immune globulin (IG) are effective HAV PEP therapies; recommendations for PEP vary with patient age and risk for severe infection and can be found on the CDPH Hepatitis A Postexposure Prophylaxis Guidance Quicksheet. (https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/Immunization/Hepatit isA-PEPQuicksheet.pdf). Vaccination with single antigen HAV vaccine generally is recommended as part of the PEP regime to provide more long-lasting protection; exceptions include infants under 12 months of age and, in uncommon situations, when vaccination is contraindicated. VCPH Communicable Disease Office will assist in the management of contacts. Providers with questions about PEP can contact the VCPH Immunization Program at 805-981-5211.
- Provide HAV vaccine to patients who are homeless and/or who use illicit drugs. Serologic testing for HAV immunity is not recommended prior to vaccination. Seroconversion following the first dose of single-antigen HAV vaccine appears to be greater than following the first dose of the combined HAV/HBV (Twinrix®) vaccine (point estimates, 98.1% vs 91.6%). This short-term advantage for single-antigen vaccine disappears when the respective series are completed, but may be important in providing near-term protection. Providers should consider the short-term risks of exposure to HAV, the likelihood of follow-up to complete multi-dose immunization, and the need for protection from HBV when selecting vaccine. Immunization against HAV with existing supplies should not be delayed to obtain a different formulation of vaccine. Providers should review their inventory of HAV vaccine to ensure adequate supplies for their patients. If additional inventory is needed, providers should use their customary sources to augment their vaccine supply.
- Consider HAV vaccination for close contacts of those in a high-risk group, and employees and
 volunteers who have frequent, ongoing close contact with homeless individuals and illicit drug users
 (e.g., in homeless shelters, jails, food pantries, drug rehabilitation programs). While occupational
 exposure does not warrant a routine recommendation, given contact with people at risk of HAV
 infection and in the setting of a potential outbreak, vaccine may be administered to those who wish to
 reduce their risk of HAV infection, consistent with the Advisory Committee on Immunization Practices
 (ACIP) recommendation. Persons working with homeless and/or illicit drug using populations should
 also be rigorous in hand washing.

Questions? Contact Ventura County Public Health's Communicable Disease Program: 805-981-5201

Additional Resources:

- Centers for Disease Control and Prevention (CDC), Hepatitis A Information for Healthcare Providers: https://www.cdc.gov/vaccines/vpd/hepa/hcp/index.html
- CDC, Hepatitis A Questions and Answers for Health Professionals: https://www.cdc.gov/hepatitis/hav/havfaq.htm
- CDC, Hepatitis A General Fact Sheet (for patients):
 https://www.cdc.gov/hepatitis/hav/pdfs/hepageneralfactsheet.pdf

- CDPH, Hepatitis A Public Health Investigation Guidance Quicksheet: https://archive.cdph.ca.gov/programs/immunize/Documents/CDPHHAVQuicksheet.pdf
- https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/Immunization/Hepatitis A-PEPQuicksheet.pdf
- San Diego County Health and Human Services Agency, Hepatitis A: http://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/community_epidemiology/dc/Hepatitis_A.html
- Santa Cruz County Health Services Agency, Hepatitis A: http://www.santacruzhealth.org/HSAHome/HSADivisions/PublicHealth/Communicable eDiseaseControl/HepatitisA.aspx

This bulletin is intended to improve the public health in our county by keeping physicians and nurses informed of noteworthy diagnoses, disease trends and other events of medical interest. Another goal of public health departments is to provide updates to inform and educate. We hope that you will use this information to increase your awareness. Please allow us to continue in our role of speaking to the press on matters such as the one above so that we may maximize the educational message to the benefit of all citizens of Ventura County.