

HEPATITIS A

What is hepatitis A?

Hepatitis A is a liver infection caused by the hepatitis A virus.

Anyone can get hepatitis A, but groups at increased risk include school aged children, young adults, staff and clients of day care centres with diapered children, travellers to countries where the disease is widespread, injection drug users, and men who have sex with men.

People with hepatitis A normally recover on their own. Relapses can occur for up to a year in 15% of cases. Once an individual fully recovers from hepatitis A, they develop lifelong immunity and will not continue to carry the virus.

What are the symptoms of hepatitis A?

The symptoms of hepatitis A may include sudden onset of fever, malaise (a feeling of being unwell), loss of appetite, nausea, dark urine, abdominal discomfort and jaundice (a yellowing of the skin and whites of the eyes). Symptoms may appear from 15 to 50 days after exposure, with an average of 28 days. The disease is rarely fatal, and most people recover in less than two months without any complications. Infants and young children tend to have very mild or no symptoms and are much less likely to develop jaundice than are older children and adults. People who have pre-existing liver problems (especially those who have hepatitis C) can become extremely ill if they contract hepatitis A. No chronic infection is known to occur.

How does hepatitis A spread?

People with hepatitis A pass the virus in their stool through fecal-oral route (drinking or eating food contaminated with stool of an infected person) or having direct contact with the infected person's stool. Individuals with increased risk include household contacts, caregivers handling diapers in child care settings and sexual contacts of an acute case. Examples of how the virus can spread include:

- Touching an infected person's stool and then eating or drinking with your unwashed hands. Most children with hepatitis A have unrecognized infections and are often the source of infection to others (i.e., changing an infected baby's diaper)
- Eating food made by someone who touched infected stool. Hepatitis A outbreaks have been traced to food contaminated by infected food handlers
- Eating food harvested from contaminated waters (such as raw or undercooked mollusks) or contaminated produce such as lettuce and strawberries
- Drinking water or drinks with ice cubes that are contaminated by infected stool (a problem in developing countries)
- Having oral-anal sex with an infected person

The contagious period begins about two weeks before the symptoms appear and continues for about one week after onset of jaundice.

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How is hepatitis A treated?

There are no special medicines or antibiotics that can be used to cure hepatitis A once the symptoms appear. Generally, bed rest is all that is needed.

People with hepatitis A should refrain from donating blood for at least six months after infection.

How can hepatitis A be prevented?

Handwashing: Wash hands after using the washroom, after changing diapers and before preparing or eating food.

Careful food preparation: Wash fruits and vegetables thoroughly in safe water before eating. Infected people should not handle foods during the contagious period.

Vaccination: Vaccines are available to individuals one year of age and older and can protect against hepatitis A infection. The Canadian Immunization Guide recommends vaccination for the following individuals due to increased risk:

- People who are in regular close contact with someone who has hepatitis A
- People with chronic liver disease (including those who have hepatitis C)
- People who have blood clotting-factor disorders
- Sexually active men who have sex with men
- People who work or reside in institutions for the developmentally disabled
- Injection drug users
- Travellers to countries where hepatitis A is common

What if I have been in close contact with someone who has hepatitis A?

Contacts are individuals exposed during the contagious period of a person infected with hepatitis A. Household members, daycare contacts or other close contacts should call their doctor or their local health department to ask if they should be vaccinated. In typical workplace and classroom situations, contacts do not need to receive the vaccine.

One dose of hepatitis A vaccine is very effective at preventing infection if given within 14 days after the last exposure to a person with hepatitis A. The vaccine may continue to provide some protection if given more than 14 days after the last exposure, but the degree of protection is unknown. For long-term protection against hepatitis A, a second dose of vaccine is recommended in six to 36 months.

Immune globulin (IG) may be recommended for individuals for whom vaccine is contraindicated or who are immunocompromised (as vaccine efficacy may be reduced) and in infants less than one year of age. Infants do not usually develop symptoms; IG should be reserved for infants who are immunocompromised, in consultation with a paediatric infectious diseases consultant.

Live vaccines should not be given for at least three months after receiving IG; if given earlier, its effectiveness will be reduced.