

Hepatitis A

An infection of the liver caused by the hepatitis A virus.

Symptoms include:

- > abdominal pain
- > loss of appetite
- > weight loss
- > nausea (and sometimes vomiting)
- > fever and chills
- > mild headache
- > tiredness
- > yellow skin and eyes
(jaundice – colour plate no. 10)
- > dark urine and pale faeces.

Older children and adults are more likely to have symptoms lasting one to two weeks, or in severe cases, up to several months. Children under age three rarely have symptoms.

The diagnosis is made by a blood test.

The infection is spread when traces of faeces (containing hepatitis A virus) contaminate hands, objects, water or food and the virus is then taken in by mouth. Hepatitis A virus is extremely durable in the environment. In Australia, most cases of hepatitis A are associated with day care centres enrolling children not yet toilet trained, sexual and household contacts of people infected with hepatitis A, overseas travel to high risk countries or illicit drug use. It is occasionally transmitted in sexual activity where faecal-oral contact occurs and rarely is transmitted by blood transfusion.

Most people recover fully and after infection will have life-long immunity. Death from hepatitis A is rare.

Incubation period

(time between becoming infected and developing symptoms)

Generally 15 – 50 days, usually 28 – 30 days.

Infectious period

(time during which an infected person can infect others)

A person is most infectious in the 2 weeks before symptoms occur and is slightly infectious during the first week of symptoms.

Treatment

There is no specific antiviral treatment for hepatitis A. Rest, good fluid intake and alteration in diet may decrease symptoms. Severely ill people require admission to hospital.

Control of spread

- > Follow good personal hygiene practices, especially thorough hand washing.
- > Good food handling procedures should always be followed.
- > An infected person should be excluded from child care, preschool, school or work for seven days after the onset of jaundice or illness.
- > Hepatitis A vaccine is offered to non-immune household and/or sexual contacts of all cases of hepatitis A who have had contact during the two weeks before, until one week after the onset of jaundice. If contacts are under one year of age, are immunosuppressed, have chronic liver disease or for whom vaccine is contraindicated, normal human immunoglobulin can be offered. Immunoglobulin is a solution containing human antibodies, made from blood products. If given within two weeks after exposure, vaccine or immunoglobulin will prevent or decrease the severity of symptoms of hepatitis A. Contacts (including those given vaccine or immunoglobulin) may remain infectious to others even if they do not develop symptoms themselves and should therefore continue to follow good personal hygiene practices.
- > If a person with hepatitis A is a food handler by occupation, vaccine (or immunoglobulin if in one of the groups for whom vaccine is not recommended) should be administered to the other food handlers employed in the same establishment.
- > Under certain circumstances vaccine (or immunoglobulin) may be offered to staff and children at child care facilities.
- > The hepatitis A vaccine provides protection against hepatitis A infection within two weeks of administration and long-term protection (longer than 10 years) if a booster dose is administered.

Hepatitis A (cont.)

Control of spread cont.

- > Vaccination is recommended in the following groups:
 - travellers to areas where hepatitis A is common
 - Aboriginal and Torres Strait Islander children residing in the Northern Territory, Queensland, South Australia and Western Australia
 - those whose occupation may put them at risk of acquiring hepatitis A (those living and working in rural and remote indigenous communities, child day care and preschool personnel, carers of people with intellectual disabilities, health care workers who regularly provide care for Aboriginal and Torres Strait Islander children, plumbers or sewage workers, and sex workers)
 - those whose lifestyle may put them at risk of acquiring hepatitis A (injecting drug users and men who have sex with men)
 - people with intellectual disabilities
 - people chronically infected with either hepatitis B or hepatitis C viruses
 - people with chronic liver disease.
- > Combined hepatitis A/hepatitis B vaccine should be considered for:
 - expatriates and long-term visitors to developing countries
 - medical, dental and nursing undergraduate students
 - men who have sex with men
 - sex industry workers
 - inmates and staff of long-term correctional facilities
 - injecting drug users
 - patients with chronic liver disease and/or hepatitis C
 - solid organ transplant recipients
 - residents and staff of facilities for people with intellectual disabilities.



Hepatitis A is a notifiable disease

- > Immunoglobulin
- > Hand Hygiene
- > Immunisation
- > Overseas Travel