
HEALTH BULLETIN

Hepatitis A Virus Outbreaks Among Homeless and Illicit Drug Using Populations in California

October 13, 2017

SITUATION:

Multiple counties in California, including Los Angeles, San Diego, and Santa Cruz, are experiencing an outbreak of Hepatitis A virus (HAV). While most cases have been found among persons who are homeless and/or use illicit (injection and noninjection) drugs, other cases have occurred in persons with no known association to those groups. Both healthcare workers and food handlers have been identified in the outbreak, though no secondary cases have been reported in connection with these sensitive occupations. Vaccination and hand hygiene with soap and water are the best prevention against HAV.

There have been no confirmed case of HAV in Kern County to date this year. Between 2011 and 2016, there were 24 confirmed cases of HAV in Kern County residents. The most common exposure/risk factor is recent international travel to a country where HAV is endemic. Providers should maintain a high index of suspicion in patients without a recent travel history as it may be an indication the outbreak has reached Kern County. Other outbreaks of HAV infection have been reported this year in New York City, Colorado, Michigan, Western Europe, and Chile. These other outbreaks have been mainly associated with men who have sex with men (MSM).

RECOMMENDATION:

In a prevention response to these ongoing outbreaks outside Kern County, the Kern County Public Health Services Department (KCPHSD) recommends that Kern County healthcare providers **offer HAV vaccine to all high risk persons, particularly to those who are homeless or might be using illicit drugs and those who have frequent close contact with persons who are homeless or use illicit drugs** (e.g. work or regularly volunteer in homeless shelters, jails, food pantries, drug rehabilitation programs, etc.). Adults should receive two doses of HAV vaccine separated by 6 to 18 months. A single dose of HAV vaccine protects most healthy persons, but completion of the recommended two-dose series achieves great than 99% protection.

On October 13, 2017, Governor Brown declared a State of Emergency to increase supply of HAV vaccine. Recognizing that supply of HAV vaccine is fluctuating, two priority groups have been identified for administration of available HAV vaccine:

1. Persons experiencing homelessness, using illicit (injection and noninjection) drugs in settings with limited sanitation, and persons in ongoing close contact with persons previously mentioned or their environments.
2. Persons identified as needing HAV post-exposure prophylaxis if within two weeks of their last exposure to HAV.

HAV vaccination continues to be routinely recommended for all children at one year of age. Vaccination of children has been recommended in California since 1999 and in all states since 2005. Persons born before 2005 may not have previously been vaccinated. The Advisory Committee on Immunization Practices (ACIP) routinely recommends HAV vaccination for adults in the following high risk populations:

- Persons traveling to or working in countries with high or intermediate levels of HAV transmission
- Men who have sex with men
- Persons who use illicit (injection and noninjection) drugs
- Persons working with primates or HAV in a research laboratory
- Persons with clotting-factor disorders
- Persons with chronic liver disease, including Hepatitis B virus (HBV) or Hepatitis C virus (HCV)

Though ACIP also recommends vaccination “for any person wishing to obtain immunity,” at this time, KCPHSD encourages providers to prioritize vaccine for patients in the aforementioned high risk and priority populations.

KCPHSD does continue to recommend vaccination of persons who have been exposed to a HAV in the prior to weeks and are not known to be immune. Post-exposure prophylaxis (PEP) should be provided to those with close contact to a confirmed HAV case as soon as possible and within two weeks of last exposure. Recommendations for PEP vary by patient age and risk for severe infection. See attached CDPH Hepatitis PEP guidelines for more details. Please be advised that the recommended dosage for immune globulin (IG) has recently increased to 0.1 mL/kg for PEP.

One dose of single antigen HAV vaccine (Havrix®, VAQTA®) appears to provide protection to more people than the first dose of the combined HAV/HBV vaccine (Twinrix®). This apparent advantage disappears when the respective series are completed. Providers should consider the short-term risks of exposure to HAV, the likelihood of follow-up to complete multidose immunizations and the need for protection against HBV when selecting vaccines for those at risk. HBV vaccine is also recommend for injection drug users not known to be immune; a complete series is needed for full protection. Immunization against HAV with existing supplies should not be delayed to obtain a different formulation of vaccine.

Consider HAV infection in individuals with discrete symptom onset and jaundice or elevated liver function tests, particularly for persons in a high risk group. The incubation period for HAV infection ranges from 15 to 50 days with an average of 28 days. Most immunocompetent adults shed virus in stool and are infectious from two weeks before through one week after onset of jaundice or elevated liver enzymes. In the absence of jaundice, persons should be considered infectious from two weeks before through one week after the onset of hepatitis symptoms.

- Symptoms of HAV may include nausea, vomiting, anorexia, fever, malaise, dark urine, diarrhea, light-colored stool, and abdominal pain.
- A complete serology panel with testing for Hepatitis A, B, and C is recommended in symptomatic patients. HIV testing is also recommended for those with undocumented HIV-status.
- Serologic testing for HAV infection is NOT recommended in asymptomatic individuals or as screening before vaccination.

Any person potentially contagious with HAV should be counseled on preventing the spread of disease. In addition to appropriate hand hygiene, patients should be advised of appropriate environmental cleaning measures, as HAV can survive outside the body for months.

Report all confirmed and suspected HAV cases to the KCPHSD **immediately**. Cases can be reported through any of the following ways:

- Submit electronically via CalREDIE
- Fax a confidential morbidity report (CMR) to (661) 868-0261
- Call KCPHSD at (661) 321-3000 and ask to speak to Disease Control



All healthcare providers are reminded of the importance of hand washing with soap and warm water before and after each patient contact. Employees in very close contact with high risk populations may consider being vaccinated through their primary care provider. Coordinate with your occupational health provider to determine if HAV vaccine should be offered to employees. Maintain routine and consistent environmental cleaning of restrooms using chlorine-based disinfectant.

Vaccine Resources

- **Medi-Cal:** HAV vaccine is covered for patients enrolled in fee-for-service and managed care plans. Vaccine administration is covered if administered in a provider's office or by an in-network pharmacy. No prior authorization is required. Patients or those assisting them can call the plan's member services number listed on the back of their Medi-Cal Benefits Identification Card to obtain information on pharmacy services. Prior to referring a patient to an in-network pharmacy for HAV vaccination, please contact the pharmacy to verify vaccine availability.
- **AIDS Drug Assistance Program (ADAP):** HAV vaccine is included on the ADAP formulary.
- **Private Insurance:** HAV vaccine is included under most private insurance plans without a copayment. Individual insurance plans should be contacted to verify coverage of HAV vaccine.
- **KCPHSD Clinics:** HAV vaccinations can be received at the KCPHSD main clinic located at 1800 Mt Vernon Avenue, Bakersfield, CA 93306. Most insurances are accepted and low cost options may be available. Please contact KCPHSD at (661) 321-3000 to verify availability.

Providers should use the California Immunizations Registry (CAIR) to determine if patients were previously vaccinated and note any vaccinations given.

If you have any questions, please contact KCPHSD at (661) 321-3000. Thank you for your commitment to the health of the community.

Sincerely,

Claudia Jonah, MD
Health Officer