

## Hepatitis A

Agent: Hepatitis A virus (Picornaviridae family)

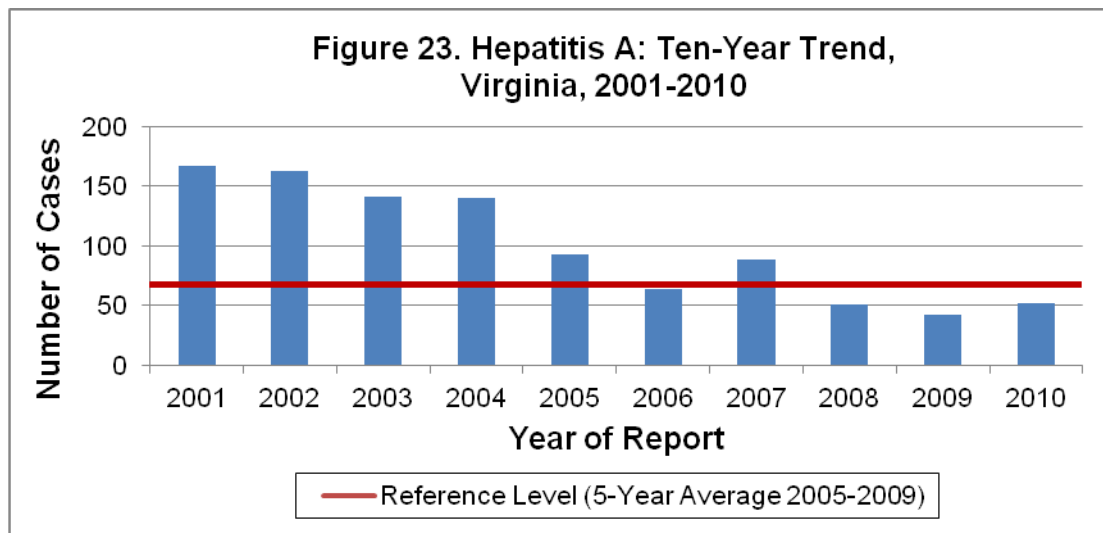
Mode of Transmission: Person-to-person transmission by direct contact with fecal material from infected animals or people. Important vehicles for transmission include food or water contaminated by infected animals or people.

Signs/Symptoms: Fever, malaise, nausea, abdominal discomfort, and jaundice. In older children and adults, symptoms usually occur for several weeks, though prolonged or relapsing liver disease can last up to six months. Younger children often exhibit no symptoms.

Prevention: Preventive measures include immunization, safe food preparation, and good personal hygiene (e.g., washing hands with soap after using the bathroom, after changing diapers, and before preparing and eating food). Administering immune globulin (IG) after exposure to hepatitis A can protect against symptomatic infection.

Other Important Information: This is an acute illness only; chronic infection does not occur. A vaccine was first introduced in 1995 and is currently recommended for all children at the age of one year, persons who are at increased risk of infection (i.e., international travelers), and persons who are at increased risk for developing complications from hepatitis A.

In 2010, 52 cases of hepatitis A were reported in Virginia. This represents a 24% increase from the 42 cases reported in 2009, but is 24% below the five-year average of 67.8 cases per year (Figure 23).



The highest incidence rate occurred in the 20-29 year age group (1.2 per 100,000) (Figure 24). No cases of hepatitis A were reported in infants and rates in the other age groups ranged from 0.2 to 0.9 per 100,000. Forty-six percent of cases were missing race information. Among cases with race reported, the rate in the “other” race population was highest (1.2 per 100,000), while the rates in the white and black populations were the same (0.2 per 100,000). Females had slightly higher rates than males (0.8 and 0.5 per 100,000, respectively).

By region, incidence was highest in the northern region (1.1 per 100,000) while rates in the other regions ranged from 0.2 to 0.7 per 100,000. Cases were reported throughout the year, with peak activity occurring in June (Figure 25). A person-to-person outbreak of hepatitis A involving a single household occurred during this month. Risk factors were identified for 34 (65%) of the 52 cases reported in 2010. Among them, six (18%) had known exposure to a confirmed hepatitis A case and 21 (62%) were associated with travel outside of the country, including travel to Asia. The single reported fatality attributed to hepatitis A during 2010 was a female in the 60 year and older age group.

