
NEW MEXICO HEALTH ALERT NETWORK (HAN) ADVISORY

Acute Hepatitis A Virus Infections in People Who Inject Drugs and Persons Experiencing Homelessness

11/08/2018

The New Mexico Department of Health (NMDOH) has confirmed three acute hepatitis A virus (HAV) infections and is investigating an additional patient with acute hepatitis in Bernalillo County. All three are people who inject drugs (PWID), and two are currently experiencing homelessness. The Centers for Disease Control and Prevention (CDC) and state health departments are investigating hepatitis A outbreaks in multiple states among persons reporting drug use and/or homelessness and their contacts. To avoid a large-scale outbreak in our communities the NMDOH is issuing this HAN to advise clinicians.

Background

From January 2017 to April 2018, CDC has received more than 2,500 reports of hepatitis A infections associated with person-to-person transmission from multiple states. Of the more than 1,900 reports for which risk factors are known, more than 1,300 (68%) of the infected persons report drug use (injection and non-injection), homelessness, or both.

The primary means of hepatitis A virus (HAV) transmission in the United States is typically person-to-person through the fecal-oral route (i.e., ingestion of something that has been contaminated with the feces of an infected person). Symptoms include fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, dark urine, clay-colored bowel movements, joint pain, and jaundice. Although rare, atypical extra hepatic manifestations include rash, pancreatitis, renal disease, arthritis, and anemia. Severe infections can result in cholestatic hepatitis, relapsing hepatitis, and fulminant hepatitis leading to death. Average incubation of HAV is 28 days, but illness can occur up to 50 days after exposure. An HAV-infected person can be viremic up to six weeks and excrete virus in stool for up to two weeks prior to becoming symptomatic, making identifying exposures particularly difficult. Illness from hepatitis A is typically acute and self-limited; however, when this disease affects populations with already poor health (e.g., hepatitis B and C infections, chronic liver disease), infection can lead to serious outcomes, including death.

Person-to-person transmission of HAV between persons who report drug use and/or homelessness could result from contaminated needles and other injection supplies, specific sexual contact and practices, or from generally poor sanitary conditions. Transience, economic instability, limited access to healthcare, distrust of public officials and public messages, and frequent lack of follow-up contact information makes this population difficult to reach for preventive services such as vaccination, use of sterile injection equipment, and case management and contact tracing. These challenges make outbreaks among these groups difficult to control.

EPIDEMIOLOGY AND RESPONSE

1190 St. Francis Drive, N1320 • Santa Fe, New Mexico • 87502-6110
(505) 827-0006 • FAX: (505) 827-2110 • www.nmhealth.org



The best way to prevent hepatitis A infection is through vaccination with the hepatitis A vaccine.

NMDOH has several recommendations for laboratories and clinicians:

- Consider hepatitis A as a diagnosis in anyone with jaundice and clinically compatible symptoms mentioned above.
- Vaccinate the following high-risk groups:
 - Persons experiencing homelessness or transient housing
 - Men who have sex with men (MSM)
 - Persons who use injection and non-injection drugs
 - Persons with chronic liver disease
- Persons who have been exposed recently to HAV and who have not been vaccinated should receive one dose of single-antigen hepatitis A vaccine or immune globulin (IG) as soon as possible, **within 2 weeks after exposure**. Guidelines vary by age and health status (please see <https://www.cdc.gov/hepatitis/outbreaks/InterimOutbreakGuidance-HAV-VaccineAdmin.htm> for additional information).
- Consider saving serum samples for additional testing to assist public health officials in the investigation of transmission (i.e., confirmation of antibody test, HAV RNA test, genotyping, and sequencing). Contact the public health department for assistance with submitting specimens for molecular characterization.
- Ensure all persons diagnosed with hepatitis A are reported to the NMDOH Epidemiology and Response Division within 24 hours.

For more information please see the links below or call the NMDOH Epidemiology and Response Division at 505-827-0006.

- [Prevention of Hepatitis A Through Active or Passive Immunization](#)
- [2017 – Outbreaks of hepatitis A in multiple states among people who use drugs and/or people who are homeless](#)
- Those at risk and their contacts can be referred to their local public health office for vaccination. For Public Health Office phone numbers and locations please visit: <https://nmhealth.org/location/public/>