



Hepatitis A- Frequently Asked Questions

How is Hepatitis A spread?

Hepatitis A is usually spread when the Hepatitis A virus from an infected person's feces (or stool, poop) gets into someone else's mouth. This often happens when the infected person's feces comes into contact with objects, food, or drinks. Most frequently, Hepatitis A is passed between people that spend a lot of time together, such as those that live together, share drugs, have sex, or someone that provides care to someone at risk. In the current outbreak in Southeast Michigan and other areas of Michigan, at least half of the cases appear to be linked to illicit drug use.

Risks for Hepatitis A during this outbreak include:

- Injecting drugs or using street drugs (including pain killers)
- Going to jail
- Paying for sex or trading sex for money or drugs
- Being homeless or having an unstable living situation
- Men that have sex with men

Anyone with these risk factors, or living with someone with one of these risk factors, should get vaccinated for hepatitis A.

How do you prevent Hepatitis A?

Handwashing is one of the best ways to reduce your risk of getting hepatitis A. Hepatitis A is spread by the fecal-oral route, which means you can get ill if you eat, drink, or touch your mouth with any food, drink, object, or your hands that may have been in contact with stool (feces) from someone infected with hepatitis A. Washing your hands thoroughly after using the bathroom and before handling or eating food can help prevent this.

Getting vaccinated for hepatitis A is also extremely effective. Anyone with the risk factors listed above or those that have regular, close contact to people with those risk factors, should get vaccinated. It is also being recommended that food handlers with one or more of the above risk factors and food handlers in outbreak areas as well as healthcare workers caring for patients in the outbreak areas get vaccinated.

If you may have been exposed to someone infected with hepatitis A, you may be able to prevent illness by getting the hepatitis A vaccine or a dose of immunoglobulin (IG) within 2 weeks after you were exposed. This is referred to as post-exposure prophylaxis (PEP).

What should be given for post-exposure prophylaxis (PEP)?

If you have not been vaccinated for hepatitis A before or had a confirmed case of hepatitis A in the past, you should be given a hepatitis A vaccine* or IG (0.1 mL/kg) as soon as possible, again, within 2 weeks after exposure. Which one you get varies by age and health status:

- For healthy people age 12 months to 40 years, Hepatitis A vaccine is preferred
- For people age 41 years and older, IG is preferred because this age group wasn't initially included in the studies done to determine if vaccination was effective to prevent

infections after exposure. Also IG is recommended for older individuals because hepatitis A infection is usually more serious in older adults.

- However, vaccine should be given to individuals over 40 in addition to IG and can be used alone if IG is not available. Additional studies suggest vaccination alone is likely effective for PEP in healthy adults over 50 or 60 years old.
- IG should be used:
 - For children aged less than 12 months, immunocompromised persons, persons with chronic liver disease, and persons who are allergic to the vaccine or a vaccine component
 - Pregnant women that have been exposed should receive both the vaccine and IG (per recent unpublished recommendations from the CDC)

*NOTE: for complete and life-long protection against Hepatitis A, a second dose of Hepatitis A vaccine is needed at least 6 months later

How else can I prevent Hepatitis A?

Hepatitis A vaccination is recommended for all children at age 1 year, for anyone at increased risk for infection, for anyone at increased risks for complications from Hepatitis A, and for anyone wishing to be protected. The Hepatitis A vaccination is recommended for the following groups:

- All children at age 1 year (i.e., 12–23 months). Children who have not been vaccinated by age 2 can be vaccinated at any time.
- Persons traveling to or working in countries that have higher risks of Hepatitis A. People from the United States who travel to developing countries are at high risk for Hepatitis A. The risk for Hepatitis A exists even for travelers to urban areas, those who stay in luxury hotels, and those who report that they are careful about what they drink and eat. Some experts feel that travel to any country is a risk and recommend Hepatitis A vaccination for any international travel.
- Men who have sex with men. Sexually active men (both adolescents and adults) who have sex with men should be vaccinated.
- Users of illegal injection and noninjection drugs (included pain killers). During the past two decades, outbreaks of Hepatitis A have been reported with increasing frequency among users of both injection and noninjection drugs in North America, Europe, and Australia. In fact, several large outbreaks are occurring around the country, including Southeastern Michigan, which appears to be linked at least in part to drug use.
- Persons who have occupational risk for infection. Persons who work with HAV-infected primates or with HAV in a research laboratory setting should be vaccinated. No other groups have been shown to be at increased risk for HAV infection because of occupational exposure.
 - Also, it is currently being recommended that healthcare workers caring for patients in outbreak areas be vaccinated, primarily those in contact with high risk populations, such as workers in emergency departments, janitorial staff, EMS, paramedics, and other first responders.
 - Although they are not necessarily at higher risk for infection, it is being recommended that food handlers in outbreak areas be vaccinated. This is due to the risk a hepatitis A-infected food handler has in spreading disease to a large number of people due to contamination of food.
- Persons who have chronic liver disease. Persons with chronic liver disease who have never had Hepatitis A should be vaccinated, as they have a higher rate of serious and

life-threatening Hepatitis A. Persons who are either awaiting or have received liver transplants also should be vaccinated.

- Persons who have clotting-factor disorders. Persons who have never had Hepatitis A and who are getting clotting-factor concentrates, especially solvent detergent-treated preparations, should be vaccinated.
- Household members and other close personal contacts of adopted children newly arriving from countries with high prevalence of Hepatitis A.

Where can I go to get a Hepatitis A vaccine?

- Your local health department, primary care provider, or visit <https://vaccinefinder.org>. An appointment may be necessary