



STATE OF WEST VIRGINIA
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
Bureau for Public Health

Bill J. Crouch
Cabinet Secretary

Office of Epidemiology & Prevention Services

Rahul Gupta, MD, MPH, MBA, FACP
Commissioner
State Health Officer

MEMORANDUM

DATE: May 4, 2018

TO: Rebecca King
State School Nurse Consultant
WV Department of Education

FROM: Shannon McBee
Division of Infectious Disease Epidemiology

RE: Statewide Hepatitis A Outbreak

The purpose of this memorandum is to address the current statewide Hepatitis A outbreak in West Virginia and how it may impact schools across West Virginia. On April 20, 2018 the West Virginia Bureau for Public Health (WVBPH) issued a Health Alert regarding an increased number of hepatitis A virus (HAV) infections in some counties, namely Kanawha and Putnam.

Cases of HAV reported are highly mobile, and many have been discharged against medical advice making it challenging for public health to follow-up with appropriate prevention actions. Coinfections with hepatitis B (HBV) and hepatitis C (HCV) are prevalent. Injection and non-injection drug use have been documented.

Parents are encouraged to review their children's vaccination status. HAV vaccine is recommended for all children 12 months of age and older. The vaccine is given as two doses, at least six months apart. Two doses are needed for long-term protection.

Children younger than 6 years usually have few or no signs or symptoms. Symptoms are more common in older children and adults.

- Fever
- Jaundice
- Abdominal discomfort
- Tiredness
- Dar-brown urine
- Loss of appetite, nausea
- Occasional, diarrhea can occur.

HAV is spread through the fecal-oral route. This generally involves an infected child contaminating his/her own fingers, then touching an object that another child touches. The child who touched the contaminated surface then puts their fingers into his/her own mouth or another person's mouth. Schools are encouraged to have faculty and students use good hand-hygiene always. Teach children to wash their hands after using the toilet and before any activity that potentially involves food or putting anything in the mouth. Routine cleaning and disinfection of surfaces is recommended, as HAV can survive on surfaces for weeks.

Report suspected cases to the local health department immediately. Children and adults, especially food handlers, with HAV should be excluded for 1 week after onset of illness.

Schoolroom exposure generally does not pose a considerable risk of infection and post exposure prophylaxis is not indicated when a single case occurs, and the source of infection is outside the school. However, Hepatitis A vaccine or immune globulin could be used for unimmunized individuals who have close contact with the index patient if transmission within the school setting is documented.

For additional information contact the Office of Epidemiology and Prevention Services, Division of Infectious Disease Epidemiology (DIDE) at (304) 558-5358, extension 1; (800) 423-1271, extension 1; or the 24/7 answering service (304) 925-9946.

For more information on the current HAV outbreak visit: https://dhhr.wv.gov/oeps/disease/viral-hepatitis/pages/hepA_outbreak.aspx.