



TO: West Virginia Healthcare Providers, Hospitals and other Healthcare Facilities

**FROM: Rahul Gupta, MD, MPH, MBA, FACP - Commissioner and State Health Officer
WVDHHR, Bureau for Public Health**

DATE: June 12, 2018

LOCAL HEALTH DEPARTMENTS: PLEASE DISTRIBUTE TO COMMUNITY HEALTH PROVIDERS, HOSPITAL-BASED PHYSICIANS, INFECTION CONTROL PREVENTIONISTS, LABORATORY DIRECTORS, AND OTHER APPLICABLE PARTNERS

OTHER RECIPIENTS: PLEASE DISTRIBUTE TO ASSOCIATION MEMBERS, STAFF, ETC.

The West Virginia Bureau for Public Health (BPH) continues to investigate cases of hepatitis A in the state as part of the multi-state outbreak that is occurring nationally. Persons who use injection and non-injection drugs, persons with unstable housing or are homeless, persons with recent history of incarceration, and men who have sex with men are considered at high-risk for infection. From January 2017 to April 2018, the Centers for Disease Control and Prevention (CDC) has received over 2,500 reports of hepatitis A associated with person-to-person transmission from multiple states; of case investigations for which risk factors were known, 1,300 cases reported drug use, homelessness, or both risk factors.

As of June 8, 2018, West Virginia has identified 203 cases from 11 counties. Most cases have been reported from Cabell, Kanawha, and Putnam counties. Hospitalization remains high at about 70%. BPH is working closely with local health departments to obtain the most complete epidemiologic data available on cases to prevent secondary cases among close contacts. Vaccination of high-risk groups continues to be an important strategy in preventing new cases. In early June, BPH collaborated with the Regional Jail Authority to vaccinate inmates at the Western and Southcentral Regional Jails.

CDC recently updated guidance to assist in identifying and preventing new infections. Complete information can be found at: <https://emergency.cdc.gov/han/HAN00412.asp>. Healthcare providers are encouraged to:

- Report all hepatitis A diagnoses to the local health department in which the patient resides **within 24 hours**.
- Consider hepatitis A as a diagnosis in anyone with jaundice and clinically compatible symptoms.
- Vaccinate persons who have been exposed to a diagnosed hepatitis A case **within 2 weeks of exposure**.
- Vaccinate individuals in high-risk groups, persons with clotting factor disorders, and persons with a history of chronic liver disease, such as hepatitis B or hepatitis C.

For more information, contact your local health department or the Office of Epidemiology and Prevention Services, Division of Infectious Disease Epidemiology at 1 (800) 423-1271, extension 1 or (304) 558-5358, extension 1. Additional information on hepatitis A, including diagnosis and vaccination, is available on the CDC's webpage, "*Hepatitis A Questions and Answers for Health Professionals*", at <https://www.cdc.gov/hepatitis/hav/havfaq.htm>. Information about the hepatitis A outbreak in West Virginia including updated case counts can be found at www.hepawarewv.org.

This message was directly distributed by the West Virginia Bureau for Public Health to local health departments and professional associations. Receiving entities are responsible for further disseminating the information as appropriate to the target audience.

Categories of Health Alert messages:

Health Alert: Conveys the highest level of importance. Warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation. May not require immediate action.

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