



County of Santa Cruz

HEALTH SERVICES AGENCY

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COMMUNICABLE DISEASE UNIT

URGENT PUBLIC HEALTH ALERT: UPDATE

To:	All Healthcare Providers
From:	Arnold S. Leff, MD, REHS, County Public Health Officer
Date:	October 31, 2017
Subject:	Increased Vigilance for Hepatitis A

Governor Declares Hepatitis A Emergency — Request for Increased Vigilance

Current situation:

On Friday, October 13, Governor Brown declared a **state of emergency** due to hepatitis A (HAV) outbreaks in Santa Cruz, San Diego, Los Angeles, and cases elsewhere. Santa Cruz County usually has 1-2 confirmed cases per year. As of October 20, 2017, over 70 cases of hepatitis A have been confirmed in just the last six months. Most of these cases have occurred among persons who are homeless or use illicit drugs (injection or non-injection). It is critical that providers maintain vigilance with testing these vulnerable groups.

However, **an increasing percentage of cases fall outside those vulnerable groups**. Some groups at risk are medical staff, custodial services, corrections officers, case management workers, and other occupations that have close contact with the most vulnerable groups. The Santa Cruz County Health Officer strongly recommends that all health care facilities continue vaccination of the homeless and illicit drug-using populations, and expand their vaccinations beyond the most vulnerable populations to include:

- **Health care personnel at risk for contracting HAV**
- **Persons with close contact to highly vulnerable populations**
- **Food service workers**

Under the Affordable Care Act, HAV vaccination is covered by health insurers as preventive care, without a deductible or co-pay. The Health Officer's recommendations align with the Advisory Committee on Immunization Practices (ACIP) as well as the California Department of Public Health's All Facilities Health Notification.

For more information:

- <https://www.hhs.gov/hepatitis/policies-and-guidelines/affordable-care-act/index.html>
- <https://archive.cdph.ca.gov/certlic/facilities/Documents/LNC-AFL-17-13.pdf>
- <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-17-21.aspx>

In addition to expanding the population recommended for vaccination, public health officials are requesting that healthcare facilities adhere to the following protocols:

CASE RECOGNITION:

- **Test for HAV infection in symptomatic individuals** – especially the homeless and those who use illicit drugs, with discrete onset of symptoms, and jaundice or elevated liver function tests. Symptoms of concern include nausea, vomiting, diarrhea, anorexia, fever, malaise, dark urine, light-colored stool, and abdominal pain. A complete viral hepatitis blood panel is recommended in symptomatic patients. *Serologic testing for HAV infection is not recommended in asymptomatic individuals or as screening before vaccination.*
- **Recognize that relapsing hepatitis A can occur** in the six months after acute illness. Patients experiencing relapsing hepatitis A can be contagious and multiple relapses can occur.
- **Be aware that hepatitis A can present with symptoms like those of cholecystitis.** Cholestatic hepatitis has been reported to affect up to 5% of the affected population in San Diego County.

CASE REPORTING:

- ***Immediately* call (831) 454-4114 to report confirmed or suspect cases** of hepatitis A to the Santa Cruz County Public Health Communicable Disease Unit (CDU) in order to facilitate case interviews before the patient leaves the facility. Then **also promptly report cases** of HAV via fax to **(831) 454-5049** using the Confidential Morbidity Report (CMR) found here: www.santacruzhealth.org/CDUnit
 - Copies of pertinent laboratory testing results and clinical notes should be included.
 - **Collection of contact information and travel history is of utmost importance.**
- **Encourage patients to remain at the facility long enough for Public Health staff to interview them.**

VACCINATION and Post-Exposure Prophylaxis:

- In light of the increased demand for hepatitis A vaccine, providers should request enough vaccine to meet potential patient surge. The Governor's order gives the California Department of Health Services authority to allocate the limited supply of vaccine.
- Provide post-exposure prophylaxis (PEP) for close contacts of confirmed HAV cases. Susceptible people exposed to HAV should receive a dose of single-antigen HAV vaccine or intramuscular (IM) immune globulin (IG) (0.02 mL/kg), or both, as soon as possible within 2 weeks of last exposure. The efficacy of combined HAV/Hepatitis B virus (HBV) vaccine for PEP has not been evaluated, so it is not recommended for PEP. Detailed information on PEP may be found on the CDPH Hepatitis A Postexposure Prophylaxis Guidance Quicksheet (updated August 2016):
<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/Immunization/HepatitisA-PEPQuicksheet.pdf>

SANITATION:

- Bathrooms, and surfaces in heavily used areas such as waiting rooms, should be sanitized frequently, with a bleach solution.

For more information:

- <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/Hepatitis-A.aspx>
- <https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/Immunization/HepatitisA-Quicksheet.pdf>

If you have questions or information regarding possible cases, please call the Public Health Division Communicable Disease Unit at (831) 454-4114.