To: Local Health Departments, Hospital Emergency Departments, Infection Control Preventionists and Infectious Disease Physicians, Homeless Shelters, and Drug and Alcohol Treatment Centers
From: Division of Infectious Diseases
Date: October 26, 2017
Subject: Hepatitis A Outbreaks in the U.S.

In 2017 several states and the CDC have investigated multiple outbreaks of hepatitis A. These outbreaks are predominantly occurring in the homeless population and persons who use injection and non-injection drugs, along with close contacts to both groups. There have been 51 individual cases of hepatitis A reported in Illinois in 2017, with two of the cases reporting homelessness and five cases reporting injection drug use. However, there are no known outbreaks in Illinois. The purpose of this memo is to increase awareness of this public health concern among health care providers and among those actively involved with the homeless and injection drug user populations. If health care providers identify any suspected cases of hepatitis A, especially within these high risk groups, it is important to confirm the case with serologic testing and to promptly report them to your local health department. Cases among this population can be difficult to locate so quick identification and reporting can ensure the cases are thoroughly investigated and control measures, such as vaccination, implemented to prevent further spread.

Symptoms of hepatitis A virus infection can include yellow eyes or skin, abdominal pain, pale stools, and dark urine. To prevent hepatitis A, CDC recommends the following groups be vaccinated for hepatitis A:

- All children at age 1 year
- Travelers to countries that have high rates of hepatitis A
- Family members and caregivers of recent adoptees from countries where hepatitis A is common
- Men who have sexual contact with other men
- Users of injection and non-injection illegal drugs
- People with chronic (lifelong) liver diseases, such as hepatitis B or C
- People who are treated with clotting-factor concentrates
- People who work with hepatitis A infected animals or in a hepatitis A research laboratory.
In addition to those recommended above, hepatitis A vaccine should be considered for homeless individuals, those with established risk factors who are not yet immunized, and for those who have ongoing close contact with homeless persons or persons who use injection and non-injection drugs. Certain contacts to hepatitis A cases should also receive post-exposure prophylaxis such as hepatitis A vaccine or hepatitis A-specific immunoglobulin (IG).

Please share this information with health care providers, clinics, homeless shelters, and other organizations who may come in contact or identify cases in these risk groups. For more information about this topic, please contact your local health department or the IDPH communicable disease control section at 217-782-2016. More information about the current hepatitis A outbreaks in the U.S. and about current recommendations can be found on the CDC website.