

**MEMORANDUM**

To: Local Health Departments, Hospital Emergency Departments, Infection Control Preventionists, Infectious Disease Physicians, Homeless Shelters, Drug and Alcohol Treatment Centers, and Illinois Laboratories

From: Communicable Disease Control Section

Date: June 5, 2018

Re: Continued Increased Hepatitis A (HAV) Surveillance

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**Key messages:**

- 1.) Multiple states are experiencing large outbreaks of HAV, predominantly among drug users and homeless populations.
- 2.) Providers should consider HAV in the differential, appropriately test, and promptly report cases to their local health departments. Providers should also offer vaccination to patients meeting CDC guidelines.
- 3.) Local health departments are asked to promptly investigate all HAV case reports in order to identify exposures and contacts.
- 4.) Laboratories are asked to promptly report all hepatitis A positive results, and store all specimens for 30 days.

**Background:** In the fall of 2017, the Illinois Department of Public Health (IDPH) issued a memo regarding multiple outbreaks of HAV in several states. Many of these outbreaks are still ongoing and additional outbreaks have been reported in several new states, including in nearby states such as Indiana, Michigan and Kentucky. These outbreaks are predominantly occurring in persons who use injection and non-injection drugs (IDU) and in the homeless populations, along with close contacts of both groups. Additional outbreak clusters have also been identified in men who have sex with other men (MSM) and persons who are or have recently been incarcerated. These cases have had high hospitalization rates, as well as high co-infection rates with Hepatitis C and B.

**Illinois Hepatitis A cases:** The last known HAV cases among Illinois homeless individuals were in the fall of 2017; however, there have been sporadic cases reported among injection drug users and persons who have traveled to outbreak states. Thus far, these cases are isolated and there are no known outbreaks in Illinois.

**Clinicians and Local health departments:** If health care providers identify any suspected cases of HAV, 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.

The HAV vaccination is safe, and highly effective. To prevent hepatitis A, CDC recommends the following groups be vaccinated for HAV:

- All children at age 1 year
- Travelers to countries that have high rates of hepatitis A
- Family members / caregivers of recent adoptees from countries where HAV 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 infected animals or in a HAV research laboratory

In addition to those recommended above, HAV vaccine should be considered for homeless individuals and for those who have ongoing close contact with homeless persons or persons who use injection and non-injection drugs.

Local health departments are asked to promptly investigate all HAV case reports in order to identify exposures and contacts. Quick identification and reporting can ensure cases are thoroughly investigated and control measures, such as vaccination, are implemented. If cases are identified to be linked to homeless or drug using populations, or outbreaks, the local health department may also be asked to facilitate shipment of specimens from such cases.

**Laboratories:** The IDPH Communicable Disease Control Section (CDCS) is also requesting that all laboratories continue to keep and store all positive hepatitis A IgM specimens in their laboratories for at least 30 days. During outbreak situations, state and local health department staff may request submission of specimens from recently confirmed hepatitis A virus (HAV) cases for additional testing. CDC's Division of Viral Hepatitis Laboratory uses advanced molecular detection to link cases into outbreak clusters. The local health department will contact you if there is a request for a sample to be sent for molecular testing at the CDC.

Please share this information with health care providers, clinics, jails, 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 CDCS 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](#).