

P. O. BOX 3378 HONOLULU, HI 96801-3378

January 5, 2018

In reply, please refer to: File:

MEDICAL ADVISORY: HEPATITIS A CASES ON KAUAI WITH LIKELY LINKS TO CALIFORNIA OUTBREAK

Dear Healthcare Provider:

The Hawaii Department of Health (HDOH) is investigating hepatitis A virus (HAV) infection in two unrelated persons who reside in Kauai. The virus isolate in both cases has been matched by the Centers for Disease Control and Prevention to a strain currently circulating in the ongoing HAV outbreak focused in San Diego, California. One case had history of travel to San Diego during the exposure period. The other *did not* and is not currently epidemiologically linked to the first case, although investigation is ongoing. Illness onsets for the two cases were from late November 2017.

HAV is a vaccine preventable disease, and the vaccine is highly protective with a reported efficacy of 94–100% for the 2-dose series. The current two cases are a reminder of how disease may travel via returning residents and visitors. Please encourage your patients to get vaccinated if they have not already; those who have already received one HAV dose should complete the series to assure long term immunity.

Additionally, please be vigilant and consider HAV infection in persons with symptoms of fever, malaise, anorexia, nausea, dark urine, abdominal discomfort, clay-colored bowel movements, and/or jaundice. HAV-infected persons are most infectious during the 1–2 weeks before onset of jaundice or elevation of liver enzymes, when concentration of virus in the stool is highest, until one week after jaundice or symptom onset. Transmission is usually person-to-person by the fecal-oral route or through ingestion of a contaminated vehicle such as food. Household and sexual contacts are at increased risk of infection.

Diagnosis requires detection of IgM antibodies against HAV (anti-HAV IgM) in the serum of acutely or recently ill patients. IgM generally becomes detectable 5–10 days before symptom onset and may remain detectable for up to 6 months. Providers should also obtain AST (SGOT) and ALT (SGPT) values (required as part of reporting cases to HDOH) to document elevated

¹https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/Hepatitis-A-Outbreak.aspx

² Prevention of Hepatitis A Through Active or Passive Immunization Recommendations of the Advisory Committee on Immunization Practices (ACIP), MMWR, May 19, 2006, p. 11 (https://www.cdc.gov/mmwr/PDF/rr/rr5507.pdf).

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values as well as a complete medical and medication history as false positive IgM values are possible.

Persons with HAV infection should be excluded from food-handling and direct-care occupations for the first 2 weeks of illness and at least 7 days after onset of jaundice.

Cases of HAV infection, which is URGENTLY notifiable, should be reported by telephone as soon as illness is suspected. Do NOT wait for laboratory confirmation to report.

Oahu (Disease Investigation Branch)	(808) 586-4586
Maui District Health Office	(808) 984-8213
Kauai District Health Office	(808)241-3563
Big Island District Health Office (Hilo)	(808) 933-0912
Big Island District Health Office (Kona)	(808) 322-4877
After hours on Oahu	(808) 566-5049
After hours on Neighbor Islands	(808) 360-2575 (toll free)

We appreciate your assistance in monitoring and preventing HAV infection among Hawaii's residents and visitors.

Sincerely,

Sarah Y. Park, MD, FAAP

State Epidemiologist

Hawaii Department of Health

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