Northern Nevada Public Health | Epidemiology & Public Health Preparedness

June 23, 2025, Vol. 45, No. 15
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EPI-NEWS

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IN THIS ISSUE: HEPATITIS A VIRUS

Hepatitis A Virus

Introduction

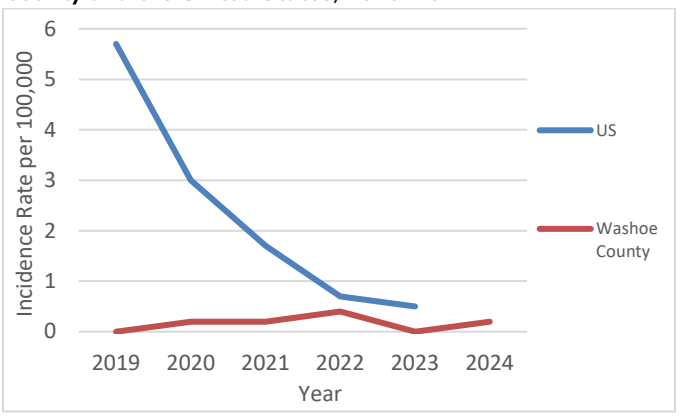
May is national Hepatitis Awareness Month, and in early May, the Los Angeles County Department of Public Health in California declared a communitywide outbreak of hepatitis A virus infections among their residents. Therefore, Northern Nevada Public Health (NNPH) would like to take this opportunity to provide information about Hepatitis A.

Hepatitis A is a liver infection caused by the hepatitis A virus (HAV). Symptoms of hepatitis A include abdominal pain, diarrhea, dark urine, pale stools, fatigue, fever, jaundice, joint pain, nausea, vomiting, and loss of appetite. Some persons, especially young children, may be asymptomatic. Illness is typically mild, although severe illness or death can occur, particular among the elderly or persons with other serious underlying health conditions. HAV is found in the stool and blood of persons who are infected. It spreads through either ingesting contaminated food or drink or from person-to-person contact (e.g., sharing needles during drug use or having certain types of sexual contact with an infected person). Persons infected with HAV can transmit the virus to others even if they do not have symptoms. Vaccination is the best way to prevent hepatitis A. Infection with HAV confers life-long immunity.[1,2]

Epidemiology

After annual increases from 2015–2019, hepatitis A cases began to decrease nationally in 2020. In 2023, 1,648 new cases of hepatitis A were reported in the United States (US), with an estimated 3,300 infections after adjusting for case under-ascertainment and underreporting.[1] Hepatitis A in Washoe County continues to remain relatively rare, ranging from zero (0) to two (2) cases annually between 2019 and 2024, for an incidence rate of 0 to 0.4 per 100,000 respectively [Fig 1]. Washoe County's incidence rate is below the national incidence rate (0.5 per 100,000 in 2023).

Figure 1: Incidence Rate of Acute Hepatitis A in Washoe County and the United States, 2019-2024.



Source: NNPH surveillance data and the CDC's 2023 Viral Hepatitis Surveillance Report

Since 2016, the US has experienced hepatitis A outbreaks in multiple states that were caused by person-to-person spread primarily among adults who use drugs and experience homelessness. Currently, there is an ongoing outbreak of hepatitis A in Los Angeles, CA. Unlike many outbreaks, however, most infections in the Los Angeles outbreak (53% to date) have occurred among people without identifiable risk factors such as travel or homelessness.[3]

Risk Factors

Anyone who hasn't been vaccinated or previously infected can get hepatitis A. However, those at an increased risk include international travelers, people experiencing homelessness, men who have sex with men, people who use or inject drugs, people whose jobs increase the risk of exposure (e.g., working with HAV in a lab), and close personal contact with an international adoptee.[2]

Prevention

The best way to prevent infection is vaccination. Vaccination is currently recommended for:

- All children ages 12–23 months

- All children and adolescents 2–18 years of age who have not previously received hepatitis A vaccine
- People at increased risk for HAV (as noted above)
- People at increased risk for severe disease from hepatitis A infection (e.g., existing chronic liver disease, including hepatitis B and hepatitis C, or HIV)
- Pregnant persons at risk for hepatitis A or at risk for severe outcome from hepatitis A infection.

Vaccination should also be offered to persons who request it. There is no danger in receiving the vaccine again if someone isn't sure if they ever got it.[2] Other prevention measures include good hand hygiene (e.g., wash hands with soap and water after using the bathroom, caring for someone with an infection, changing diapers, and before preparing or eating food.)[2]

Diagnosis and Testing

Clinical features alone are not sufficient to distinguish HAV from other types of viral hepatitis. The following are laboratory markers that, if present, indicate an acute HAV infection:

- Immunoglobulin M antibodies to HAV (IgM anti-HAV) in serum, or
- HAV RNA is serum or stool

Serologic tests for IgG anti-HAV and total anti-HAV (IgM and IgG anti-HAV combined) are not helpful in diagnosing acute illness.

It is recommended to only test patients for IgM anti-HAV if they are symptomatic and HAV infection is suspected. Alanine aminotransferase (ALT) and total bilirubin tests can aid in diagnosis.[5]

Treatment and Post-Exposure Prophylaxis (PEP)

Treatment is supportive care with management of complications. [4]

If someone has been exposed to HAV in the previous 14 days and is not immunized, HAV vaccine can be given as PEP (post-exposure prophylaxis) to prevent disease. Immune globulin intramuscular (IGIM) may also be considered in addition to HAV vaccine based on a patient's age or underlying medical conditions. IGIM should be given as PEP instead of vaccine in certain circumstances (e.g., too young to receive vaccine, severe vaccine allergy).[4]

Reporting

The list of reportable communicable diseases and reporting forms can be found at:
http://tinyurl.com/WashoeDiseaseReporting

Report communicable diseases to Northern Nevada Public Health. To report a communicable disease, please call 775-328-2447 or fax your report to the NNPH at 775-328-3764.

Acknowledgement

Thank you to all health care providers, infection control practitioners, laboratory staff, as well as schools and daycares for their reporting and collaboration to make this work possible.

References

1 Centers for Disease Control and Prevention. Viral Hepatitis Surveillance Report – United States, 2023. https://www.cdc.gov/hepatitis-surveillance-2023/about/index.html Published April 2025. Accessed 26 May 2025.
2 Centers for Disease Control and Prevention. Hepatitis A Basics.. Accessed 26 May 2025. https://www.cdc.gov/hepatitis-a/about/index.html
3 County of Los Angeles Public Heath.. Los Angeles County Hepatitis A Outbreak – 2025http://publichealth.lacounty.gov/acd/diseases/hepa-data.htm
4 American Academy of Pediatrics. Committee on Infectious Diseases. Red Book: 2024-2027 Report of the Committee on Infectious Diseases.
5 Centers for Disease Control and Prevention. Clinical Screening and Diagnosis for Hepatitis A. Accessed 28 May 2025. https://www.cdc.gov/hepatitis-a/hcp/diagnosis-testing/index.html