



# Hepatitis D

## What is Hepatitis D?

Hepatitis D is an infection of the liver caused by the hepatitis D virus. Hepatitis D only exists in the presence of hepatitis B. Hepatitis D infection may occur as an acute co-infection with hepatitis B. Adults can usually recover, resulting in immunity. In 2% of cases, acute co-infection may progress to a carrier status. Also, hepatitis D can occur as a super infection in persons already chronically infected with hepatitis B, which will usually progress to chronic hepatitis D.

## What is the occurrence of Hepatitis D?

Hepatitis D occurs worldwide. The high prevalence areas for hepatitis D are southern parts of Italy, parts of Eastern Europe, South America, Africa and the Middle East. Hepatitis D occurs very rarely in Ontario.

## How does Hepatitis D spread?

Hepatitis D is very infectious and is found in the blood, semen, or vaginal fluids of an infected person. You can get hepatitis D when an infected person's blood or body fluids enter your body through cracks and cuts in your skin, through mucous membranes or directly into your blood stream. This can happen during unprotected sexual contact or by sharing needles and drug related equipment. The chances of becoming infected depend on the amount of virus present in the blood or body fluids.

## Who can get Hepatitis D?

As with people at risk for hepatitis B, anyone who comes in direct contact with or has frequent exposure to blood or body fluids is at risk of becoming infected with hepatitis D. There is an increased risk of transmission in the following:

- Injection drug users using HDV-contaminated injection needles
- Persons receiving clotting factor concentrates (i.e., people with haemophilia)
- People with multiple sex partners
- Men who have sex with men
- Household contacts of acute or chronic cases
- Neonates born to carrier mothers
- Sexual partners of hepatitis D virus infected persons
- Health care and public safety workers who have exposure to blood and body fluids in the workplace
- Institutionalized populations (i.e. individuals in correctional facilities and group homes)
- Haemodialysis patients

For further information, please call:  
**York Region Health Connection 1-800-361-5653**  
**TTY 1-866-252-9933 or visit [www.york.ca](http://www.york.ca)**

## What are the signs and symptoms of Hepatitis D?

Many people with hepatitis D have no symptoms; however, the symptoms of acute hepatitis D are similar to those of acute hepatitis B infection and can include:

- Jaundice (yellowing of the skin and eyes)
- Dark urine
- Loss of appetite
- Fatigue
- Vague abdominal discomfort
- Joint pain
- Fever
- Nausea and vomiting

The time between exposure to hepatitis D and symptoms is two to eight weeks.

Signs of a super infection usually consist of a more severe and more rapid progression of disease, thus increasing the risk of liver failure or cirrhosis (scarring of the liver). Progression to cirrhosis usually takes 5 to 10 years, but it can appear 2 years after the onset of symptoms.

## Is there a test for Hepatitis D?

Your health care provider can order a blood test for hepatitis D. Discuss this with your health care provider if you are at risk of hepatitis D.

## What is the treatment for Hepatitis D?

Follow up with your health care provider to discuss treatment options.

## How can it be prevented?

There is currently no cure for hepatitis D. However, for people without hepatitis B, immunization against hepatitis B will protect against hepatitis D. People with hepatitis B should try to eliminate their risk of exposure to blood or blood products to ensure they do not become infected with hepatitis D. Injection drug users should avoid re-using any drug-related equipment.

Tell your sexual partner(s) if you are infectious. Protect them by using latex condoms during sexual intercourse. Inform your partner(s) to be tested for hepatitis B. Free hepatitis B vaccine is available for sexual partners and household contacts of a person with hepatitis B.

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