York Region

Hepatitis A

What is Hepatitis A?

Hepatitis A is a liver infection caused by the hepatitis A virus. The disease is fairly common, with several hundred cases reported each year in Canada.

Anyone can get hepatitis A, but it occurs most frequently in school age children and young adults. Other groups at increased risk of getting hepatitis A include staff and clients of day care centres with diapered children, travellers to countries where the disease is widespread, injection drug users, and men who have sex with men.

People with hepatitis A normally recover on their own. Relapses can occur for up to a year in 15 per cent of cases. Once an individual fully recovers from hepatitis A, he or she is immune for life and will not continue to carry the virus.

What are the symptoms of hepatitis A?

The symptoms of hepatitis A may include fever, a feeling of being unwell, loss of appetite, nausea, abdominal discomfort and sometimes diarrhea. Urine may become darker in colour and jaundice (a yellowing of the skin and whites of the eyes) may appear. The symptoms may appear from two to seven weeks after exposure, but usually occur about four weeks after exposure. The disease is rarely fatal, and most people recover without any complications after several weeks. Infants and young children tend to have very mild or no symptoms, and are much less likely to develop jaundice than are older children and adults. People who have pre-existing liver problems (especially those who have hepatitis C) can become extremely ill if they contract hepatitis A. No chronic infection is known to occur.

How does hepatitis A spread?

People with hepatitis A pass the virus in their stool (feces). It is common for the hepatitis A virus to spread to the household and sexual contacts of an acute case. The virus can spread by:

- Touching an infected person's stool (for example, changing an infected baby's diaper), and then eating or drinking with your hands. Most children with hepatitis A have unrecognized infections and are often the source of infection to others
- Eating food made by someone who touched infected stool. Hepatitis A outbreaks have been traced to food contaminated by infected food handlers
- Eating food harvested from contaminated waters (such as raw or undercooked molluscs) or contaminated produce such as lettuce and strawberries
- Drinking water or drinks with ice cubes that are contaminated by infected stool (a problem in developing countries)
- Having oral-anal sex with an infected person

The contagious period begins about two weeks before the symptoms appear, and continues for about one week after onset of jaundice.

How is hepatitis A treated?

There are no special medicines or antibiotics that can be used to cure hepatitis A once the symptoms appear. Generally, bed rest is all that is needed.

How can hepatitis A be prevented?

Hepatitis A can be prevented through the following measures:

Handwashing: Wash hands after using the washroom, after changing diapers and before preparing or eating food.

Careful food preparation: Wash fruits and vegetables thoroughly in safe water before eating. Infected people should not handle foods during the contagious period.

Vaccination: Vaccines are available to protect against hepatitis A and are recommended for the following individuals:

- People who are in regular close contact with someone who has hepatitis A
- People with chronic liver disease (including those who have hepatitis C)
- People who have blood clotting-factor disorders
- Sexually active men who have sex with men
- People who work or reside in institutions for the developmentally disabled
- Injection drug users
- Travellers to countries where hepatitis A is common

Note: vaccines are for people one year of age and older.

What if I have been in close contact with someone who has hepatitis A?

Household members, daycare contacts or others who have learned that they are in close contact with an infected person should promptly call a doctor or their local health department to ask if they should be vaccinated. In typical workplace and classroom situations, contacts do not need to receive the vaccine.

If an exposure to hepatitis A has taken place, one dose of hepatitis A vaccine is very effective at preventing infection if given within two weeks after the last exposure to a person with hepatitis A. The vaccine may continue to provide some protection if given more than two weeks after the last exposure, but the degree of protection is unknown. For long-term protection against hepatitis A, a second dose of vaccine is recommended in six to 12 months.

In very rare circumstances, immune globulin (IG) is provided for infants less than one year of age, immunocompromised people who may not respond fully to the vaccine, and those for whom vaccine is contraindicated.

Infants do not usually develop symptoms, so immune globulin should be reserved for infants who are immunocompromised, in consultation with a pediatric infectious diseases consultant.

It is important to note that live vaccines should not be given for at least three months after receiving immune globulin because if given earlier, their effectiveness will be reduced.