

Hepatitis A Surveillance in Indiana Correctional Facilities

Nationally, several ongoing hepatitis A outbreaks are occurring in Arizona, California, Colorado, Michigan, New York, Utah, and Kentucky (Louisville metro area). Since January 1, 2018, 42 confirmed cases of hepatitis A have been reported in Indiana compared to a yearly average of 20 cases. To date, 15 cases have been identified in jail offenders, including two cases who were infected after arriving at the jail. Cases identified in local Indiana correctional facilities have been linked to homeless shelters or homeless camps in Louisville and injection drug use. The Indiana State Department of Health (ISDH) is recommending that all correctional facilities in Indiana conduct active surveillance for hepatitis A among offenders and staff. Additionally, at this time, the ISDH is encouraging jails in affected communities of Clark, Floyd, Harrison, Washington, and Scott Counties to begin vaccinating offenders for hepatitis A upon intake.

Hepatitis A Overview

Hepatitis A is an infection of the liver caused by hepatitis A virus (HAV). Symptoms vary greatly, from severe to none at all, and may include:

- Loss of appetite
- Nausea
- Tiredness
- Fever
- Abdominal pain
- Diarrhea
- Dark-colored urine
- Light-colored stools
- Jaundice (yellowing of skin and eyes)

Jaundice may appear a few days after the onset of these symptoms. Persons become ill 15 to 50 days (average of 30 days) after being exposed to the virus. Any inmate or staff member with these symptoms should be isolated/excluded from the general jail population and should seek medical care immediately. Blood specimens may be collected to test for HAV.

HAV is passed in the stool, and people become infected by having contact with the stool of an infected person (fecal-oral route). For this reason, the virus is more easily spread in areas where sanitary conditions are poor or where good personal hygiene is not common. Common exposures include:

- Food or beverages, including ice, prepared or served by an infected person(s)
- Sexual contact involving stool

- Contaminated objects, such as cigarettes, with trace amounts of fecal material from hand contact that are placed in the mouth

HAV is also present in the blood in the early stage of infection, so infection can also be transmitted through injection drug use by using contaminated needles and other items used to inject drugs.

Active Surveillance

Jail staff should conduct active surveillance to identify potential cases of hepatitis A in your facility. This includes:

- Screening all individuals (offenders and staff) as they enter your facility for HAV symptoms and risk factors
- Asking all individuals about any symptom development **daily**
- **Promptly** isolating ill individuals showing signs and symptoms of HAV infection
- Reporting anyone with symptoms to your local health department **immediately**

If hepatitis A infection is suspected in any individuals based on clinical assessment, please call your local health department to report the possible case and obtain proper specimens for initial hepatitis A testing (IgM anti-HAV). A questionnaire is available to identify individuals who may have risk factors related to this outbreak of hepatitis A, including travel to Louisville, KY; history of homelessness; and history of drug use. Educational materials on handwashing and other preventive measures is available upon request.

Prevention

Additionally, hepatitis A can be prevented by adhering to the following guidelines:

- **Wash hands with soap and water** after using the restroom and before, during, and after food preparation. Ensure all restrooms have soap, running water, and disposable hand towels or dryers.
- Wash all produce before eating raw or cooking
- Use treated water for washing, cooking, and drinking
- Exclude any person who is jaundiced within the last 7 days from food preparation
- Sanitize all non-porous surfaces after being exposed to fecal matter with a solution of 1-2/3 cup of bleach per 1 gallon of water

A safe, effective vaccine, is available through a health care provider to prevent hepatitis A. Two doses of vaccine, given six months apart, are required for full protection. Your local health department and the ISDH are available for consultation regarding vaccine.

For questions regarding hepatitis A virus infection and/or specimen collection and testing authorization information, please contact Nicole Stone, ISDH Foodborne and Waterborne Disease Epidemiologist, at 317-234-2898 or NStone2@isdh.in.gov. For general questions about hepatitis A, please call the Epidemiology Resource Center at 317.233.7125.