

Health Alert

Hepatitis A Increases among At-Risk Persons in Philadelphia: Recommendations for Prevention and Control through Vaccination August 6, 2021

Although Hepatitis A Virus (HAV) activity subsided following the outbreak among at-risk persons in 2019, HAV infections are once again increasing in Philadelphia (Figure). A preliminary count of 15 confirmed HAV cases have occurred since mid-June 2021. Among the HAV cases occurring since June, 12 cases (80%) reported current injection drug use including 8 cases (53%) who were also experiencing homelessness or unstable housing. Two other HAV cases (13%) reported past or non-injection drug use and unstable housing. Median age of the recent cases was 33 years (range: 27–54 years), and 87% were male. As demonstrated during the HAV outbreak in 2019, **HAV vaccination is the most important strategy** to prevent further increases in HAV.

HAV Prevention and Control:

Providers should use all opportunities to routinely give HAV vaccine to all children at age 12-23 months and to any person wishing to obtain immunity, **as well as the following persons at high risk for exposure to HAV:**

- Persons who use injection or non-injection drugs
- Men who have sex with men
- Persons experiencing homelessness or unstable housing
- Persons who are or were recently incarcerated
- Persons with chronic liver disease
- Persons with HIV

One dose of single-antigen HAV vaccine leads to a protective response in 95% of healthy individuals for up to 11 years. Two doses given at least 6 months apart provide life-long immunity. Vaccines for Children (VFC) and Vaccines for Adults at Risk (VFAAR) providers should continue to order HAV vaccine through the PhilaVax inventory module. If your facility does not have HAV vaccine, please encourage patients to visit a [pharmacy](#) if they have insurance. Non-healthcare organizations and facilities who serve at-risk persons are encouraged to contact PDPH to schedule HAV vaccination clinics. If you have questions about accessing vaccine, contact Jillian Brown: Jillian.Brown@phila.gov.

Case ascertainment: Prompt recognition of HAV is also important to control transmission and allow time-sensitive administration of post-exposure prophylaxis (PEP) to exposed contacts. One dose of single antigen HAV vaccine given within 2 weeks of last exposure can prevent infection in healthy contacts aged ≥12 months who lack HAV immunity and have no HAV vaccine contraindications. ALL confirmed and suspected Hepatitis A cases should be promptly reported to PDPH at 215-685-6740 during regular business hours or 215-686-4514 after-hours. PDPH can provide details on local risk factors, diagnostic testing, and disease control recommendations. For further information, please see: <https://www.cdc.gov/hepatitis/outbreaks/2017March-HepatitisA.htm>.

SUMMARY POINTS

- Hepatitis A is increasing in Philadelphia among persons who use drugs and those living homeless.
- Take every opportunity to vaccinate at-risk persons.
- Consider acute HAV infection among patients presenting with compatible symptoms.
- Promptly report acute cases to PDPH.

Increase in Confirmed Acute Hepatitis A Cases, Philadelphia, January 2020 – July 2021

