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FORMER FRANKLIN COUNTY INMATE HAS HEPATITIS A

A former Franklin County inmate has tested positive for hepatitis A virus (HAV). She was incarcerated in the Franklin County jail in September, after which she returned to Spokane. Washington State is experiencing a hepatitis A outbreak in multiple counties, including Spokane; this is the first case linked to our area. Benton-Franklin Health District (BFHD) is working to identify exposed contacts and facilitate HAV post-exposure prophylaxis (PEP).

If female patients report being held in Franklin County jail in the month of September, please contact BFHD.

Consider HAV infection in patients with compatible symptoms including:

Fatigue, fever, headache, joint pain, nausea, vomiting, abdominal pain, loss of appetite, dark urine, clay-colored stools, and jaundice.

70% of older children and adults develop symptoms including jaundice; 70% of infections in children < 6 years of age are asymptomatic.

Collect specimens for laboratory testing on patients with suspected HAV infection:

Serum for hepatitis A IgM and IgG and liver enzymes (including ALT, AST).

Test for hepatitis B (HBsAg and IgM) and hepatitis C (antibody/EIA) to rule out other types of viral hepatitis.

Counsel patients with HAV infection about the importance of practicing good hand hygiene – including thoroughly washing hands after using the bathroom, changing diapers, and before preparing or eating food and that they are most contagious (fecal-oral route) for 2 weeks before through 1 week after the onset of jaundice, and possibly longer if they have persistent diarrhea.

Suspected or confirmed cases should be excluded from volunteering and working in sensitive areas (food handling, health care, childcare settings), until assessed by Public Health.

Patients with suspected or confirmed hepatitis A who are living homeless should be isolated while infectious.

HAV PEP regimens vary by age and health status, see link below. BFHD is available for consultation on when PEP is indicated.

<https://www.cdc.gov/hepatitis/hav/havfaq.htm>

Report confirmed and suspected HAV cases to BFHD at 509-539-0416 during business hours OR 509-543-3851 after hours.

To avoid missed opportunities, emergency departments, healthcare systems and clinics should routinely offer HAV vaccine at all clinical encounters to persons at increased risk, including those living homeless and persons who inject drugs, and healthcare providers should counsel patients regarding risk for HAV infection. In addition, HAV vaccine should be offered to anyone who wishes to reduce their risk of infection.