Alabama’s Hepatitis A Outbreak Continues to Spread

Key Message
The Alabama Department of Public Health (ADPH) is investigating an outbreak of hepatitis A (hep A) in high-risk people located in Northeastern Alabama, specifically Jackson and DeKalb Counties.

Key Facts
• As of January 3, 2019, ADPH has confirmed 7 Hep A cases in Jackson County and 7 Hep A cases in DeKalb County.
• In the 12 months prior to this outbreak investigation, Alabama had 28 cases statewide.
• Tennessee and Kentucky have been investigating a similar Hep A outbreak over the last 12 months. TN has had over 597 cases, 374 hospitalizations, and 2 deaths identified. KY has had over 3,265 cases identified, 1,625 hospitalizations, and 21 deaths.
• ADPH is assisting in the vaccination of high-risk individuals by obtaining Hep A vaccine for high risk, uninsured or underinsured.
• Health care workers are not considered high risk when using appropriate PPE following Standard Precautions.

Objectives
• Vaccinating as many people as possible with Hep A vaccine is essential in stopping the spread of this disease, including children. The Vaccines For Children (VFC) Program provides vaccine for eligible children using the ACIP catch-up schedule through 18 years of age.
• ADPH recommends providers vaccinate anyone in the following high-risk groups, even if no known contact to symptomatic people:
  o People who use recreational drugs.
  o Persons who participate in anal/oral sex including men who have sex with men (MSM).
  o Individuals who are experiencing homelessness or in transient living.
  o Recently incarcerated.
  o Chronic liver disease.
  o Immunocompromised persons.
  o Vaccinate the patient’s family and close contacts, including anyone in the high-risk groups, even if there is no known contact to symptomatic people.
• A presumptive diagnosis of hepatitis A must be reported within 24 hours by physicians, nurses, hospital administrators, infection control practitioners, AND laboratory directors. To report complete the Communicable Disease REPORT Card, https://epiweb.adph.state.al.us/redcap/surveys/?s=H37ENP8ADD or contact ADPH at 1-800-469-4599 (24/7/365).
• Symptoms of a presumptive diagnosis may include acute onset of symptoms of jaundice or fever, abdominal pain, headache, vomiting, nausea, malaise, dark urine, and/or anorexia. Document if the patient had contact with a person diagnosed with hep A.

Specimen Collection and Shipping
ADPH would like all (suspected and confirmed) specimens sent to be genetically characterized. Follow instructions below to properly collect and send specimens to the Bureau of Clinical Laboratories (BCL).
• Collect blood sample in tiger/red top tube, centrifuge, extract approximately 2-3 ml serum and place in sterile tube.
• Serum should be kept refrigerated (2-8°C) until ready to ship.
• The specimen should be placed in an insulated container with frozen ice packs for shipping.
• Complete a BCL Requisition Form for each specimen and test ordered, http://www.adph.org/bcl/assets/BCL_Requisition_Form.pdf: Include patient information, specimen collection date, date of symptom onset, as well as dates, locations of recent travel, and relevant vaccine history.
• Specimens may be dropped off at your local county health department to be couriered to the BCL overnight, or can be shipped directly to the BCL at 8140 AUM Drive, Montgomery, AL 36117 (at your expense). Please call prior to dropping off specimens.
• If you have questions about specimen collection and shipping, call the BCL at 334-260-3400 or email mclab@adph.state.al.us.

An updated news release will be issued.

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