

Hepatitis A Virus (HAV): Quick Reference Guide for Health Care Professionals

Report hepatitis A (HAV) infection (positive anti-HAV IgM) to the Minnesota Department of Health. See [Reporting Hepatitis](http://www.health.state.mn.us/diseases/hepatitis/hcp/report.html) (www.health.state.mn.us/diseases/hepatitis/hcp/report.html).

Etiology

- HAV is an RNA virus in the picornavirus group.

Signs and symptoms

- May be asymptomatic.
- Symptoms usually occur abruptly and may include fever, tiredness, loss of appetite, nausea, abdominal discomfort, dark urine, or jaundice. Children are unlikely to experience symptoms.
- Symptoms generally last less than two months; occasionally, prolonged or relapsing illness can last up to six months.
- Average incubation period is 28 days (range: 15-50 days).

Long-term effects

- Chronic infection does not occur.
- HAV infection confers life-long immunity.

Transmission

- Fecal-oral transmission by:
 - Person-to-person contact.
 - Ingestion of contaminated food or water.

Communicability

- Two weeks before symptom onset until two weeks after symptom onset or one week after jaundice (if present).

Risk groups

- Persons who use injection and non-injection drugs.
- Persons experiencing homelessness.
- Persons who are currently or recently incarcerated.
- Men who have sex with men (MSM).
- Household contacts of infected persons.
- Sexual contacts of infected persons.
- Persons traveling to regions of the United States with high rates of HAV infection.
- Persons traveling to regions where HAV is common, including Central and South America, Africa, and Asia.

Prevention

- Hepatitis A vaccine is the best way to prevent infection.
- Hand washing with soap and water after using the bathroom or changing diapers and before preparing or eating food.

Vaccine recommendations

- Hepatitis A vaccine is recommended for:
 - Persons who use injection and non-injection drugs.
 - Persons experiencing homelessness.
 - Persons who are currently or recently incarcerated.
 - Men who have sex with men (MSM).
 - Household contacts of infected persons.
 - Sexual contacts of infected persons.
 - Persons traveling to regions of the United States with high rates of HAV infection.
 - Persons traveling to regions where HAV is common, including Central and South America, Africa, and Asia.
 - Persons with chronic liver disease.
 - Persons with clotting-factor disorders (e.g., hemophilia).
 - Anyone seeking protection from hepatitis A.

Medical management

- Supportive care.

Post-exposure management

- Hepatitis A vaccine should be administered for post-exposure prophylaxis to stop the onset of symptoms for all persons age 12 months and older exposed within the previous 2 weeks.
- In addition to hepatitis A vaccine, Immune Globulin (IG) may be administered to persons age 40 years and older depending on the extent of exposure and immunocompetence of the exposed individual.
- For children under 12 months of age, immune globulin (IG) may be given in persons exposed within the previous two weeks.

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www.health.state.mn.us/hepatitis

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