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July 13 2017 Clinical Advisory – Immunize to Prevent and Control Hepatitis A Outbreaks

Outbreaks of hepatitis A disease are currently ongoing in two California counties in persons who are homeless and/or using illicit drugs. [In San Diego County](#) at least 228 cases and 5 deaths have been reported since November 2016. [In Santa Cruz County](#) at least 27 cases have been reported since April 2017. Cases due to the same strain of hepatitis A virus (HAV) have been identified in both counties as well as in Arizona and Utah. Transmission is presumed to occur person-to-person; no commercial product has been identified as being contaminated. Based on current information, all populations who are homeless or using injection and noninjection illicit drugs can be considered at risk of outbreaks if exposed to HAV. The California Department of Public Health recommends:

To prevent and control hepatitis A outbreaks, offer HAV vaccine to persons who are homeless or might be using illicit injection or noninjection drugs.

In jurisdictions with hepatitis A outbreaks, also offer HAV vaccine to persons who have frequent close contact with persons who are homeless or using illicit drugs (e.g., in homeless shelters, jails, food pantries, drug rehabilitation programs, etc.).

HAV vaccine is routinely recommended for:

- Persons with chronic liver disease, including those with hepatitis B or C virus (HBV or HCV) infection
- Users of injection and noninjection illicit drugs
- Men who have sex with men
- Persons traveling to or working in countries that have [high or intermediate levels of HAV transmission](#)
- Any person wishing to obtain immunity to HAV
- Persons who have been exposed to HAV in the prior 2 weeks and are not known to be immune ([immune globulin is an alternative to vaccine or given in addition to vaccine in some instances](#)).

Additional information

- For Medi-Cal patients (Fee-for-Service or Managed Care), HAV vaccine given in a provider's office or network pharmacy is covered without prior authorization. Call the Plan's member services number (on the back of the patient's Medi-Cal Benefits ID Card) to locate a network pharmacy and confirm availability of vaccination at the pharmacy. [Local health departments](#) can help identify resources for uninsured persons.
- The first dose of single-antigen HAV vaccine appears to provide protection to more people than the first dose of the combined HAV/HBV (Twinrix®) vaccine (see [Table 3, product insert](#)). This apparent advantage disappears when the respective series are completed. Providers should consider the short-term risks of exposure to HAV, the likelihood of follow-up to complete multidose immunization and the need for protection from HBV when selecting vaccines for those at risk. Immunization against HAV with existing supplies should not be delayed to obtain a different formulation of vaccine.
- HBV vaccine is also recommended for injection drug users who are not known to be immune. A complete vaccination series is needed for full protection.
- Serologic testing for HAV infection is not recommended for asymptomatic people, nor is serologic testing for HAV immunity recommended as screening before vaccination.

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