Hepatitis A: Questions and Answers

information about the disease and vaccines

What causes hepatitis A?

Hepatitis A is an infectious liver disease caused by hepatitis A virus (HAV).

How does hepatitis A virus spread?

Hepatitis A virus is spread from person to person by putting something in the mouth that has been contaminated with the stool (feces, poop) of a person infected with hepatitis A virus. This type of spread is called "fecal-oral." This can happen in a variety of ways, such as when an infected person who prepares or handles food doesn't wash his or her hands adequately after using the toilet and then touches other people's food. A person can also be infected by drinking water contaminated with hepatitis A virus or drinking beverages chilled with virus contaminated ice. Contaminated food, water, and ice can be significant sources of infection for travelers to many areas of the world. For this reason, the virus is more easily spread in areas where there are poor sanitary conditions or where good personal hygiene is not observed.

Most hepatitis A viral infections in the United States result from international travel to countries with intermediate or high rates of hepatitis A virus infection, contact with a household member or sex partner who has hepatitis A, or sharing street drugs. Casual contact, as in the office, factory, or school setting, is a rare way to spread the virus.

Can hepatitis A virus be spread through sex?

Yes. Sex involves close, intimate contact (vaginal, anal, or oral sex) and increases the risk of exposure to hepatitis A virus in the feces of an infected person.

What are the symptoms of hepatitis A?

Not everyone infected with hepatitis A virus will have symptoms; however, some infected people can feel quite sick. If symptoms are present, they usually include fever, tiredness, loss of appetite, nausea, abdominal discomfort, vomiting, joint pain, clay-colored stools, dark urine, and jaundice (yellowing of the skin and eyes).

How long does it take to show signs of illness after coming in close contact with a person who has hepatitis A virus infection?

It can take 15–50 days to develop symptoms (average 28 days). People with hepatitis A virus infection might not have any signs or symptoms of the infection. Adults are more likely to have symptoms than children. About 7 out of 10 adults have symptoms, while children younger than age 6 years usually have no symptoms. About 1 out of 8 people with symptoms will have a prolonged or relapsing infectious illness that lasts up to 6 months.

How long do symptoms last?

Symptoms usually last less than 2 months; however, a few people are ill for as long as 6 months.

How serious is hepatitis A?

Hepatitis A can be quite serious. While most people fully recover within 2–3 months, older people, and those with chronic liver disease or other health problems may develop severe illness. A multi-state hepatitis A outbreak that began in 2016 in the United States has primarily involved people who use drugs, people who were homeless, and their close contacts. As of July 2020, more than 33,300 cases had been reported, of whom 61% had been hospitalized and about 1% died.

Can people become chronically (life-long) infected with hepatitis A virus?

No. Hepatitis A leads to a short-term infection, limited to a few weeks or months, not a chronic infection. Relapsing hepatitis A, as described above, goes away and is NOT a chronic infection. Both hepatitis B and hepatitis C viruses can cause chronic infection.

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How common is hepatitis A in the United States?

The incidence of hepatitis A in the U.S. increased more than 10-fold from 2015 to 2019, with over 18,800 cases reported to U.S. Centers for Disease Control and Prevention (CDC) in 2019. The number of reported cases declined by half to 9,952 in 2020.

This number is an underestimate of the actual number of infections: CDC estimates that about 19,900 cases actually occurred in 2020. In recent years, large outbreaks have occurred among people experiencing homelessness, people who use drugs, and men who have sex with men. A smaller number of cases are associated with international travel or eating imported food contaminated with HAV.

How common is hepatitis A virus infection throughout the world?

Hepatitis A occurs throughout the world. It is especially common in countries in Latin America, Africa, the Middle East, Asia, the Caribbean, and the Western Pacific. This means that people can become infected with the virus in many travel destinations, even when using luxury tourist accommodations. The only destinations around the world for which CDC does not recommend hepatitis A vaccination or immune globulin (IG) for U.S. travelers before departure are Canada, Australia, New Zealand, Japan, and parts of Western Europe.

How does a person know if he or she is infected with hepatitis A virus?

To diagnose acute hepatitis A, a blood test called "IgM class antibody to hepatitis A virus" (IgM anti-HAV) is needed. There is also a blood test available that shows if an unvaccinated person was infected with hepatitis A virus in the past (total hepatitis A antibody, also called anti-HAV). Talk to your doctor or your local health department if you suspect that you have been exposed to the virus or any other type of hepatitis virus.

Is there a treatment for hepatitis A?

No. There is no specific treatment for hepatitis A. Supportive care includes bed rest, fluids, and fever-reducing medicines. Take fever-reducing medicine only if your physician recommends it.

How long can a person with hepatitis A virus infection spread the virus?

The most likely time for an infected person to spread hepatitis A virus to others is during the 2 weeks before the infected person develops symptoms (e.g., yellowing of skin and eyes). The risk of spreading hepatitis A virus becomes lower over time and can still be present 1 week or longer after symptoms develop. Infants are more likely to spread hepatitis A virus for longer periods of time.

If an unvaccinated person has had close personal contact with a person who is infected with hepatitis A virus, what should the person do?

If an unvaccinated person thinks that he or she might have been exposed to hepatitis A virus, the person should call their healthcare provider immediately to determine what to do. Vaccine or IG may be needed. IG is a concentrated dose of human antibodies that includes anti-HAV. In most cases, either of these preparations can protect an exposed person from developing hepatitis A virus infection. It's important to give vaccine and/or IG within 2 weeks following an exposure (the sooner, the better) to prevent infection caused by the exposure. Vaccination provides long-lasting protection and should be done unless vaccine is contraindicated. IG alone is used for children younger than age 1 year or people who either refuse or cannot be vaccinated. IG may be given, in addition to vaccine, based upon a healthcare provider's evaluation of people over 40, people who are immuno-compromised, and people with chronic liver disease.

Can a person be infected with hepatitis A virus more than once?

No. Once a person recovers from the infection, he or she develops life-long protection from future infection.

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How does hepatitis A virus differ from hepatitis B virus (HBV) and hepatitis C virus (HCV)?

- Hepatitis A, B, and C are three different viruses that injure the liver and cause similar symptoms in people with acute (recently acquired) disease.
- Hepatitis A virus is spread by getting infected fecal matter into a person's mouth who has never had hepatitis A virus infection (e.g., through unwashed hands or sexual contact). Hepatitis B and hepatitis C viruses are spread when an infected person's blood or blood-contaminated body fluids enter another person's bloodstream.
- Hepatitis B and hepatitis C virus infections can cause chronic liver problems. Infection with hepatitis A virus does not.
- There are vaccines that will protect people from infection with hepatitis A and hepatitis B. Currently, there is no vaccine to protect people from hepatitis C virus infection.
- There are medications that are approved by the U.S. Food and Drug Administration (FDA) to treat chronic hepatitis B and chronic hepatitis C viral infections. There is no specific treatment for hepatitis A virus infection. (See the question "Is there treatment for hepatitis A?")
- If a person has had one type of viral hepatitis in the past, it is still possible to get the other types.

What kind of vaccine is hepatitis A vaccine?

Hepatitis A vaccine is an inactivated (killed) virus vaccine.

How is hepatitis A vaccine administered?

The vaccine is given by an injection into the muscle of the upper arm for adults and older children and in the thigh muscle of toddlers and younger children.

Who should get this vaccine?

Many people are recommended to receive hepatitis A vaccine, including people at increased risk for exposure to hepatitis A virus infection and people who are more likely to get seriously ill if infected with the virus. According to CDC recommendations, people who should be vaccinated include:

- All children starting at age 1 year (12–23 months)
- All children age 2 through 18 years not previously vaccinated
- All people infected with HIV
- People age 6 months or older who are traveling to or working in an area of the world except the United States, Canada, Japan, New Zealand, Australia, and parts of Western Europe. Vaccine given to a child age 6–11 months does not count toward the 2-dose series given after the first birthday.
- Men who have sex with men
- Users of illicit drugs, injectable or non-injectable
- People who are homeless or in temporary housing, such as a shelter
- People who anticipate having close personal contact with an international adoptee from a country of high or intermediate levels of hepatitis A virus infection during the first 60 days following the adoptee's arrival in the United States
- People who work with HAV-infected primates or with hepatitis A virus in a research laboratory setting
- People with any kind of chronic liver disease, including infection with hepatitis B or hepatitis C viruses, cirrhosis, fatty liver disease, alcoholic liver disease, autoimmune hepatitis, or liver enzyme tests (ALT or AST) persistently more than twice normal levels.
- Any person who wishes to be protected from hepatitis A virus infection

Talk to your healthcare professional to see if the hepatitis A vaccine is recommended for you.

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CDC now recommends routine hepatitis A vaccination for people who are homeless. Can you provide a definition of "homeless"?

CDC defines a homeless person as one who 1) lacks housing, 2) is without permanent housing but may stay in a shelter or transitional housing, or 3) "doubles up" with a series of friends or extended family members. It can also include people previously homeless who are being released from a prison or hospital if they do not have a stable housing situation. The key to the definition is the instability of the person's living arrangement.

How many doses of hepatitis A vaccine are recommended?

Two doses are recommended. The second dose is given no sooner than 6 months after the first dose.

I'm not in a group for which hepatitis A vaccine is recommended. Can I still get vaccinated to protect myself against infection?

Yes. Any person who wishes to be vaccinated against hepatitis A virus can receive the vaccine.

How long does hepatitis A vaccine protect you?

Estimates for long-term protection for fully vaccinated people (i.e., two-dose series) suggest that protection from hepatitis A virus infection could last for at least 25 years in adults and at least 14–20 years in children. Protection after the first dose has been shown to last more than a decade. Protection may be life-long, similar to the immunity that follows natural infection, but experts continue to evaluate the long-term effectiveness of this vaccine.

What organizations recommend hepatitis A vaccine?

CDC, the American Academy of Pediatrics, the American Academy of Family Physicians, the American College of Obstetricians and Gynecologists, and the American College of Physicians recommend this vaccine.

Is hepatitis A vaccine safe?

CDC states that the hepatitis A vaccine is safe. Since the licensure of the first hepatitis A vaccine in 1995, millions of doses of hepatitis A vaccine have been administered worldwide, as well as in the United States.

What side effects have been reported with this vaccine?

The most common side effect is a sore arm, which happens to one out of two adults and one out of five children. Less common side effects include headache, loss of appetite, low-grade fever, or tiredness. When these problems happen, they usually start 3–5 days after vaccination and usually last for 1–2 days. A very rare but serious side effect is a severe allergic reaction. If this happens, it typically occurs within a few minutes to a few hours after the injection. (See the question on "Who should not receive hepatitis A vaccine?")

Who should not receive hepatitis A vaccine?

People who have had a serious allergic reaction to hepatitis A vaccine in the past, or who are known to be allergic to any part of the hepatitis A vaccine, should not receive it. People with moderate or severe acute illness should wait to receive hepatitis A vaccine until their condition has improved.

How effective is hepatitis A vaccine?

Hepatitis A vaccine is very effective. It appears that almost all adults, adolescents, and children become immune to hepatitis A virus infection after getting two doses. After one dose, at least 94 out of 100 people become immune for several years. It is important to get the full two-dose series to ensure long-term protection.

Can I receive hepatitis A vaccine when I am pregnant?

CDC recommends that a pregnant woman at risk of hepatitis A infection or at risk of a severe outcome of hepatitis A infection during pregnancy should be vaccinated.

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Can the vaccine cause hepatitis A virus infection?

No.

What is immune globulin (IG)?

IG is a preparation of human antibodies that can be given before exposure to hepatitis A virus for 1–2 months of protection against hepatitis A virus infection and to people who have already been exposed to hepatitis A virus. IG must be given within 2 weeks after exposure to the virus for maximum protection.

What are the recommendations for the use of hepatitis A vaccine and/or IG prior to travel?

All susceptible people (individuals who have never had the infection or the vaccine) traveling to or working in countries except the United States, Canada, Japan, New Zealand, Australia, and parts of Western Europe are recommended to receive hepatitis A vaccine or IG before departure. If traveling to the Caribbean, people should consider getting hepatitis A vaccine or IG if travel is to areas of unreliable sanitation.

Infants age 6 through 11 months who are at risk of travel-related exposure to hepatitis A are recommended to receive 1 dose of hepatitis A vaccine prior to travel, along with a dose of MMR vaccine to protect against measles. Hepatitis A vaccine given before the first birthday does not count toward the routine 2-dose series.

For unvaccinated people ages 1 through 40 years, the first dose of hepatitis A vaccine is recommended to be given as soon as travel is considered. The second dose should be given at least 6 months after the first dose.

Healthcare providers caring for travelers over age 40 and travelers who are immunocompromised or who have chronic liver disease, and who are traveling within 2 weeks, may administer IG in addition to vaccine, depending upon the patient's likelihood of a protective antibody response to vaccination, the availability of IG, and the risk of hepatitis A exposure. The second dose of the 2-dose hepatitis A vaccine series should be given no sooner than 6 months after the first dose. This second dose is needed to ensure long-lasting protection.

Travelers who choose not to get the hepatitis A vaccine, who are younger than age 6 months, or who are allergic to the vaccine are recommended to be given IG only. The dosage of IG depends on the length of travel.

Can hepatitis A vaccine be given after exposure to hepatitis A virus?

Yes. People who recently have been exposed to hepatitis A and who previously have not had hepatitis A vaccine are recommended to be given a single dose of hepatitis A vaccine as soon as possible, within 2 weeks of exposure. For people older than age 40 years, IG may also be administered at the clinician's discretion, but hepatitis A vaccine can be used alone if IG is unavailable. IG alone is recommended to be given to children younger than 12 months of age and people for whom vaccine is contraindicated. Both vaccine and IG are recommended to be given to immunocompromised people and to people who have chronic liver disease.

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