**Hepatitis A**

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**What is hepatitis A?**
'Hepatitis' means inflammation or swelling of the liver. It can be caused by chemicals or drugs, or by different kinds of viral infections. One common cause of infectious hepatitis is the hepatitis A virus. Infection with one type of hepatitis virus does NOT give protection against infection with other hepatitis viruses.

**What are the symptoms?**
Symptoms include feeling unwell, aches and pains, fever, nausea, lack of appetite, abdominal discomfort, followed by dark urine, pale stools and jaundice (yellowing of the eyeballs and skin). Illness usually lasts one to three weeks (although some symptoms can last longer) and is almost always followed by complete recovery. Small children who become infected usually have no symptoms. Hepatitis A does NOT cause long-term liver disease and deaths caused by hepatitis A are rare. The period between contact with the virus to the development of symptoms is usually four weeks, but can range from two to seven weeks.

**How is it spread?**
Infected people can pass on the virus to others from two weeks before the development of symptoms until one week after the appearance of jaundice (about three weeks in total). Large amounts of the virus are found in faeces (stools) of an infectious person during the infectious period. The virus can survive in the environment for several weeks in the right conditions (for example, in sewage). Hepatitis A is usually transmitted when virus from an infected person is swallowed by another person through:
- eating contaminated food
- drinking contaminated water
- handling nappies, linen and towels soiled with the faeces of an infectious person
- direct contact (including sexual) with an infectious person.

Reported outbreaks of hepatitis A have been traced to:
- person-to-person spread, including among men who have sex with men
- drinking water contaminated with sewage
- eating food that has been contaminated with sewage such as shellfish
- eating food contaminated by an infectious food handler.

Infection with hepatitis A continues to be a problem for people travelling overseas, especially people visiting developing countries where hepatitis A is common.

**Who is at risk?**
Those who have not had hepatitis A and who have not been vaccinated against it are at risk of catching the disease.

**How is it prevented?**
A safe and effective vaccine is available against hepatitis A. The vaccine may take up to two weeks to provide protection. Vaccination is recommended for the following higher risk groups of people:
- travellers to countries where hepatitis A is common (most developing countries)
- frequent visitors to rural and remote indigenous communities
- men who have sex with men
- child day-care and pre-school workers
- the intellectually disabled and their carers
- some health care workers who work in or with indigenous communities
• sewerage workers
• plumbers
• injecting drug users
• patients with chronic liver disease
• people with haemophilia who may receive pooled plasma concentrates.

What else can be done to avoid hepatitis A?
Everyone should always wash their hands thoroughly with soap and running water for at least 10 seconds and dry them with a clean towel:
• after going to the toilet
• before eating
• before preparing food or drink
• after handling objects such as nappies and condoms.

What can be done to avoid infecting others?
If you have hepatitis A, as well as washing your hands thoroughly, you should avoid the following activities while infectious (that is, until at least one week after onset of jaundice):
• do NOT prepare food or drink for other people
• do NOT share eating or drinking utensils with other people
• do NOT share linen and towels with other people
• abstain from sex
• wash eating utensils in soapy water, and machine wash linen and towels.

The following people who have hepatitis A should not attend work and school while infectious:
• people who handle food or drink
• people whose work involves close personal contact, such as child carers and health workers
• staff, children and adolescents should not attend childcare facilities or school while infectious.
• all patients should check with their doctor before returning to work or school.

How is it diagnosed?
Diagnosis is based on the patient's symptoms and confirmed by a blood test showing IgM antibodies to hepatitis A.

How is it treated?
There is no specific treatment for hepatitis A. Household contacts and sexual partners of an infectious person usually need an injection of hepatitis A vaccine or immunoglobulin. These injections may prevent or reduce illness if given within two weeks of contact with the infectious person.

What is the public health response?
• Doctors, hospitals and laboratories must confidentially notify cases of hepatitis A infection to the local Public Health Unit.
• Public Health Unit staff will work with the doctor, the patient or the patient's family to identify close contacts at risk of infection and arrange for those at risk to receive information about the disease. Public Health Unit staff follow special guidelines for managing cases of hepatitis A in people who attend or work at a child care centre, and in people who handle food for sale.
• Public Health Unit staff also investigate outbreaks of hepatitis A to identify the cause of the outbreak, control its spread and prevent further infections.

The information in this fact sheet is general and you should see a doctor if you are worried about your health. For more information contact your doctor or the NSW Sexual Health Information Line on (Free-call) 1800 451 624