

## Hepatitis A Case in a Barrie Food Handler: Post Exposure Prophylaxis (PEP) Immunization Recommendations

**Attention:** Physicians, Emergency Departments, Nurse Practitioners, Infection Control Practitioners, Occupational Health Professionals, Walk-In Clinics/Urgent Care Clinics, Midwives, Family Health Teams, Child Care Centres, Pharmacies, Central LHIN, NSM LHIN

**Date:** July 19, 2019

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A food handler working at the State & Main restaurant (467 Cundles Road East, Barrie, ON) has been identified as a confirmed case of hepatitis A. The Simcoe Muskoka District Health Unit (SMDHU) has verified that the food handler did work at the restaurant during their period of communicability. Public notification has occurred to recommend post-exposure prophylaxis for staff and patrons who worked or dined at the restaurant during the following time periods:

- Friday, June 21<sup>st</sup> 5:00 pm -10:30 pm
- Thursday, June 27<sup>th</sup> 4:30 pm - 10:30 pm
- Friday, June 28<sup>th</sup> 10:30 am - 10:30 pm
- Saturday, June 29<sup>th</sup> 4:30 pm - 9:30 pm
- Thursday, July 4<sup>th</sup> 5:30 pm - 8:45 pm
- Friday, July 5<sup>th</sup> 6:30 pm - midnight
- Wednesday, July 10<sup>th</sup> 3:30 pm - 8:30 pm
- Thursday, July 11<sup>th</sup> 4:30 pm – 9:00 pm

The health unit will be coordinating hepatitis A immunization clinics for susceptible staff and patrons at the SMDHU Barrie Office (15 Sperling Drive, Barrie) on:

- Friday, July 19<sup>th</sup> from 4:00 pm - 8:00 pm
- Saturday, July 20<sup>th</sup> from 10:00 am - 6:00 pm
- Sunday, July 21<sup>st</sup> from 10:00 am - 6:00 pm

Publicly-funded hepatitis A vaccine can be ordered by health care providers through the Immunization Program (IP) by calling and leaving a message on our Vaccine Order Line at 705-721-7520 ext. 8808. Please leave the following information:

- Name of your facility;
- The health unit office your vaccine orders will be picked up from;
- Name of contact person for this order;
- Phone number for the contact person if questions arise about this order; and
- The client's initials and date of birth for whom the vaccine is being ordered for.

SMDHU will expedite these orders as quickly as possible.



**Indications for Post Exposure Prophylaxis (PEP):**

**Everyone six months of age and over should be offered hepatitis A vaccine as soon as possible if they worked or ate at the restaurant identified during the times specified above** (unless contraindicated or fully immunized in the past – see below for definition of fully immunized). It is recommended that monovalent vaccine be used as it has a more robust immune response required for PEP efficacy. Only one dose of hepatitis A vaccine is indicated for PEP. A second dose is indicated for long term protection. The second dose would not be publicly-funded.

Age group OR underlying condition	Post-exposure prophylaxis (PEP)	Comments
Less than 6 months of age	Serum immune globulin	Hepatitis A vaccine is not authorized for children less than six months of age.
6 months to less than 12 months of age (who are not immunocompromised and do not have chronic liver disease)	Hepatitis A vaccine	NACI's evidence review found that vaccination of infants 6 to 12 months of age with inactivated hepatitis A vaccines is immunogenic and safe. For this age group, use of the hepatitis A vaccine is considered off-label.
12 months to 49 years of age (who are not immunocompromised and do not have chronic liver disease)	Hepatitis A vaccine	If immunocompromised or have chronic liver disease, see appropriate row below.
50 years of age and over	Hepatitis A vaccine*	For individuals 50 years of age and over who are offered PEP in the context of food handler transmission only vaccine is recommended*
Pregnant or breastfeeding women	Hepatitis A vaccine	The vaccine has not been studied in clinical trials, but because the vaccine is prepared from inactivated viruses, no risk to the developing fetus is anticipated. Given that there have been hepatitis A cases associated with the food recall, the benefits likely outweigh the risks and can be recommended. HA vaccine may be administered, if indicated, to women who are breastfeeding.
Immunocompromised (by medical condition or long-term medication)	Serum immune globulin and hepatitis A vaccine	IG should only be given if exposure was <14 days. Unknown efficacy of IG beyond 14 days.
Chronic liver disease	Serum immune globulin and hepatitis A vaccine	IG should only be given if exposure was <14 days. Unknown efficacy of IG beyond 14 days.

Table adapted from Public Health Ontario: <https://www.publichealthontario.ca/-/media/documents/ga-hepatitis-a-management.pdf?la=en>

\* Hepatitis A immune globulin PEP advice from the Provincial Infectious Diseases Advisory Committee on Immunization (PIDAC-I) (IG plus hepatitis A vaccine for individuals 50 years of age and over) differs from that of the National Advisory Committee on Immunization (IG may be provided in addition to hepatitis A vaccine for those 60 years of age and over). However, when the exposure source is a food handler, those who are ≥ 50 years of age may receive HAV vaccine alone, unless they are a household/close contact of a case in which case they should also receive IG.

For those previously vaccinated with hepatitis A vaccine:

- If two previous doses were provided, no additional doses are recommended.
- If only one dose was provided and it was less than six months ago, no additional doses are recommended until at least six months from the last dose.
- If only one dose was provided and it was greater than six months ago, one additional dose is recommended.

### Disease Process:

Typically, hepatitis A is an acute, self-limiting liver infection. Clinical presentation varies with age. Infection is usually asymptomatic in children, and jaundice develops in < 10% of children six years and under. Symptoms may start 15 to 50 days after exposure and usually resolve on their own.

Typically, acute clinical illness is characterized by:

- One to seven day prodrome period of abrupt onset fever, malaise, anorexia, nausea and abdominal pain followed by jaundice.
- Dark urine and light-colored stools, as well as pruritus may occur, and an enlarged liver may be seen.
- Extra-hepatic complications may occur.
- It has been reported that between 3% and 20% of cases may experience relapsing disease.
- Fulminant hepatitis and death are rare. There is usually complete recovery without complications or sequelae. Chronic infection is not known to occur.

### Testing Recommendations:

**Serology tests indicating IgM anti-HAV antibodies confirm recent infection.** Antibodies are generally detectable in serum five to ten days after infection and usually decrease to undetectable levels within six months after onset of infection. In rare cases, antibodies may persist for longer. Detection of IgG antibodies signals recovery from acute hepatitis A infection. When IgG antibodies are detected alone, they indicate some level of immunity either from past infection or previous immunization.

“Total hepatitis A virus antibody” (total IgM and IgG antibody) is not a confirmatory test for acute HAV infection but is used as an initial screening test in some laboratories. For further information about hepatitis A IgM and IgG human diagnostic testing, contact the Public Health Ontario Laboratories or refer to the Public Health Ontario Laboratory Services webpage:

[http://www.publichealthontario.ca/en/ServicesAndTools/LaboratoryServices/Pages/Hepatitis\\_A\\_Diagnostic\\_Serology.aspx#.VxT6K45VhXs](http://www.publichealthontario.ca/en/ServicesAndTools/LaboratoryServices/Pages/Hepatitis_A_Diagnostic_Serology.aspx#.VxT6K45VhXs)

For testing ordered on staff and patrons related to this State & Main food handler situation, please add the following investigation number SMD-2019-001 to the requisition.

For further information regarding hepatitis A, to coordinate access to immunoglobulin or to report a suspect or confirmed case of hepatitis A please contact the Infectious Diseases team at (705) 721-7520 extension 8809 during business hours or after hours to 1-888-225-7851.