

Hepatitis A

Overview

Hepatitis A is a virus that infects the liver. The word "hepatitis" means "inflammation of the liver". Hepatitis A can affect the way the liver functions, leading to jaundice (yellowing of the skin), vomiting, and feeling unwell. It is a self-limiting illness that is usually not serious and there are no long-term consequences. Deaths are rare.

It is spread from human faeces via the faecal-oral route — that is, poor handwashing and contact with food, which transmits the virus to the food we eat.

It can be prevented by vaccination, which is recommended for Australians travelling to countries where there may be problems with the cleanliness of the water. Affected regions include Asia, Africa, the South Pacific, and Central and South America.

Poor handwashing and hygiene practices explain why childcare centres and residential institutions for people who are developmentally disabled are at risk of hepatitis A outbreaks. People who engage in sexual practices that involve the anus are also at risk.

You cannot get the disease more than once.

The symptoms start 15-50 days after being exposed to the virus. You are infectious for a couple of weeks after the symptoms start.

Cause

Hepatitis A is one of a number of viruses that target the liver. Other examples are hepatitis B, C, D, and E. Unlike most of these viruses, hepatitis A is not usually spread by contaminated blood. Most often, it is spread by drinking water or eating food that is contaminated with human faeces from an infected person who did not wash their hands properly.

Symptoms

The symptoms of hepatitis A infection are:

- Vomiting.
- Yellow skin and eyes.
- Pale stools.
- Dark urine.
- Constant abdominal pain in the right upper quadrant of the abdomen.
- Feeling tired.
- Fever.
- Aches and pains.

Children have fewer symptoms than adults and may seem completely well.

The diagnosis can be confirmed with blood tests, specifically:

- Antibodies against the hepatitis A virus
- Liver function tests.

People with hepatitis A are usually acutely unwell for several days but can have liver dysfunction for a couple of months.

Treatment

There is no treatment that kills the hepatitis A virus. Treatment is aimed at controlling the fever with paracetamol, controlling the vomiting with medications such as metoclopramide, prochlorperazine, or ondansetron, and treating dehydration with oral rehydration fluids or intravenous fluids through a drip.

People who have been exposed to hepatitis A, but who have not yet become sick, may be offered an injection of immunoglobulin, which contains antibodies that protect against the virus.

Prevention with vaccination is the best treatment. Handwashing is a key way to reduce transmission.

People who should have the vaccine are:

- Travellers to developing countries. Have the injection a month before going and get a booster within 12 months of the first shot. Another option is to have a combined vaccine against hepatitis A and hepatitis B. Ideally this is completed over a six-month period before travelling, but it is possible to have an accelerated course of shots over a month.
- Healthcare workers.
- People who inject drugs.
- Men who have sex with men.
- People who already have damaged livers, such as people with hepatitis B or C.

Support and resources

- Hepatitis Australia
www.hepatitisaustralia.com
- Hepatitis Australia
- MDconsult
- American Academy of Family Physicians
It'sMyHealth.com.au