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To: Local Health Department Health Directors
From: Zack Moore, MD, MPH, State Epidemiologist

Wendy Holmes, Branch Head, Immunization Branch

Subject: Hepatitis A Vaccination within Jail Health Programs (2 pages)

Date: August 28, 2018

Background

Hepatitis A outbreaks are expanding nationwide; the Centers for Disease Control and Prevention (CDC) has received reports from multiple states of more than 3,700 cases of hepatitis A infections associated with person-to-person transmission during January 2017 through July 2018. These outbreaks have been prolonged and costly. Cases have occurred primarily among three risk groups: (1) persons who use injection or non-injection drugs; (2) persons experiencing homelessness; and (3) men who have sex with men.

North Carolina is also experiencing an outbreak of hepatitis A, though not of the same magnitude as some other states; an increase in the number of cases in the region surrounding Charlotte has been observed since April 2018. The hepatitis A outbreak in North Carolina is primarily affecting persons who use drugs and men who have sex with men.

Actions for local detention centers and local public health departments

To mitigate the current outbreak and prevent a larger outbreak from occurring, we urge health departments to work with detention centers in their jurisdictions to implement a hepatitis A vaccination program. Incarcerated populations are at greater risk for hepatitis A due to risk factors such as illicit drug use and homelessness. A proactive vaccination program can also reduce the chance of transmission within jails, which can be resource-intensive and costly due to large number of potential contacts and the high rates of hospitalization (>50%).

Local public health officials in North Carolina can play an important role with the jail health system in their jurisdiction to control the spread of hepatitis A.

As part of a community-based prevention strategy, hepatitis A risk screenings and vaccination for those that are non-immune is a benefit to the incarcerated persons, jail staff and the community. The following steps are recommended for a jail health program:

- 1) Educate detainees on hepatitis A risks and encourage them to be vaccinated.
- 2) Revise intake questions to standardize hepatitis A risk assessment and enhance jail vaccinations.

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3) Expand the jail hepatitis A vaccination program to include all new detainees with negative or unknown serology or with risk factors for hepatitis A infections: persons who use drugs men who have sex with men, persons with chronic liver disease and persons experiencing homelessness. Opt-out approaches are encouraged, as they have been shown to be twice as likely to result in vaccination acceptance.

Health departments who want to add a jail health vaccination program in their county should contact their state regional immunization nurse consultant who can assist them in developing a plan. Contact the Immunization Branch at (919) 707-5575 to begin this process.

Thank you for your efforts to protect your patients and your community. For more information on the current outbreak, please visit the North Carolina hepatitis A tracking website at: https://epi.publichealth.nc.gov/cd/hepatitis/hepa_outbreak.html

Additional information on hepatitis A can be found on the CDC website at https://www.cdc.gov/hepatitis/hav/index.htm.

cc: Dr. Jean Marie Maillard, Communicable Disease Branch Medical Director Evelyn Foust, Chief, Communicable Disease Branch