





# Hepatitis A Surveillance

## 2018-To-Date Key Points

 4,962 cases

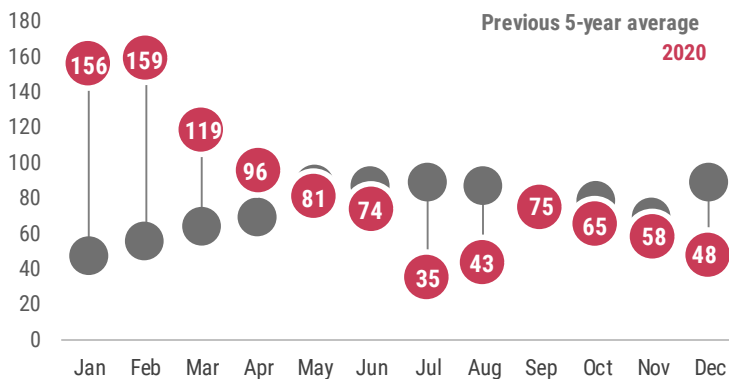
 23% cases linked to other cases

 30-39 year olds had highest incidence

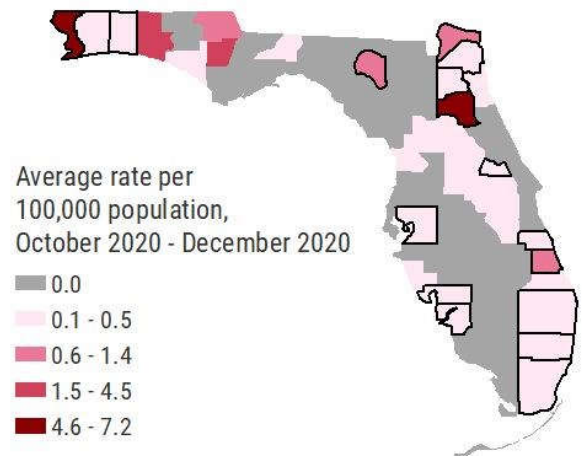
 24% co-infected with hepatitis B or C



**The number of reported hepatitis A cases in December decreased from the previous month and was similar to the previous 5-year average.** Since January 1, 2018, 98% of cases have likely been acquired locally in Florida.

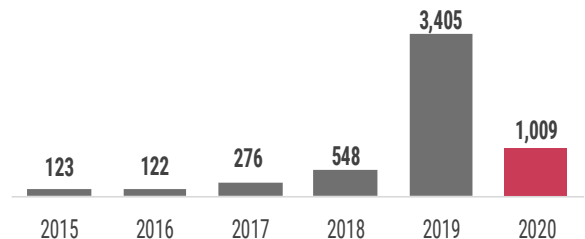


In December 2020, 48 hepatitis A cases were reported in **17 counties**, which are outlined in black in the map below. In the past three months, North Florida had the highest average incidence rates.



**From January 1, 2020 through December 31, 2020, 1,009 hepatitis A cases were reported.**

Due to the national hepatitis A outbreak, cases increased dramatically during 2018 and 2019 in Florida. Since January 2020, there has been a 70% decrease in overall cases when compared to cases in 2019.



**93%**  
never vaccinated

**The best way to prevent hepatitis A infection is through vaccination.** Since January 1, 2018, 93% of people with hepatitis A had never received a documented dose of hepatitis A vaccine. In December 2020, 94% of infected people had not received the vaccine. Since 2006, hepatitis A vaccine has been recommended for all children at age 1 year. Hepatitis A vaccine is also recommended for certain high-risk groups of adults including injection and non-injection drug use, persons experiencing homelessness, and men who have sex with men. To learn more about the hepatitis A vaccine, talk to your doctor or visit: [www.CDC.gov/Vaccines/HCP/VIS/VIS-Statements/Hep-A.html](http://www.CDC.gov/Vaccines/HCP/VIS/VIS-Statements/Hep-A.html).

**The COVID-19 pandemic is affecting health care seeking behavior, which may be impacting the diagnosis and reporting of hepatitis A cases that are shown in this report.** For more information on the COVID-19 pandemic in Florida, please visit [FloridaHealthCOVID-19.gov](http://FloridaHealthCOVID-19.gov).



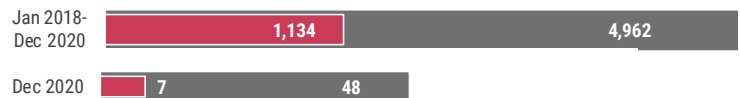
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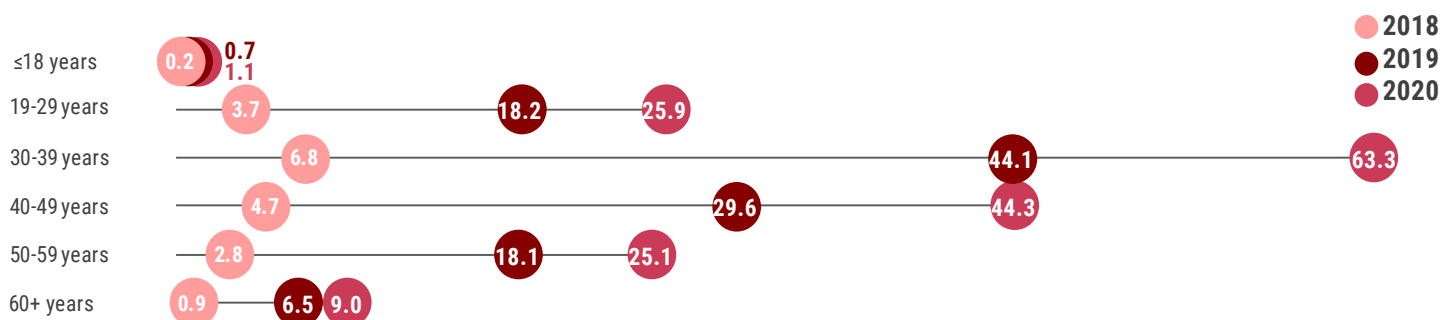
From January 2018 to December 2020, **1,134 (23%)** of 4,913 total cases of hepatitis A were **epidemiologically (epi) linked to other cases**. In December 2020, 15% of cases were epi-linked to other cases.

In December 2020, 43% of epi-links were household contacts, 29% were sexual contacts, and 14% were personal contacts.

**Epi linked cases** | **Total cases**



Since January 1, 2018, incidence rates have increased among all age groups. As of December 2020, **the 30-39 years age group had the highest incidence rate of 63.3 cases per 100,000 population among any age group and year**. Since January 1, 2018, cases were reported primarily among **men (64%)** and persons who identify as **non-Hispanic white (81%)**.



Since January 1, 2018, **90 cases (2%) were co-infected with chronic hepatitis B**, **986 cases (20%) were co-infected with chronic hepatitis C**, and **103 cases (2%) were co-infected with both chronic hepatitis B and C**. In December 2020, 8 cases (17%) were co-infected with chronic hepatitis B or C. Co-infection with more than 1 type of viral hepatitis can lead to more severe liver disease and increase the risk of developing liver cancer.

**Chronic hepatitis B** | **Chronic hepatitis C** | **Chronic hepatitis B and C** | **No co-infection**



## National activity

Hepatitis A rates have decreased by more than 95% since the first vaccine became available in 1995. However, since March of 2017, the Centers for Disease Control and Prevention has been monitoring outbreaks in 35 states among persons who use drugs and persons who are experiencing homelessness. More information about these outbreaks can be found here: [www.cdc.gov/hepatitis/outbreaks/2017April-HepatitisA.htm](http://www.cdc.gov/hepatitis/outbreaks/2017April-HepatitisA.htm)

## Hepatitis A surveillance goals

- Identify and control outbreaks and monitor trends
- Identify and mitigate common sources
- Monitor effectiveness of immunization programs and vaccines

To learn more about hepatitis A, please visit [FloridaHealth.gov/HepA](http://FloridaHealth.gov/HepA). For more information on the data sources used in Florida for hepatitis A surveillance, see the last page of this report.

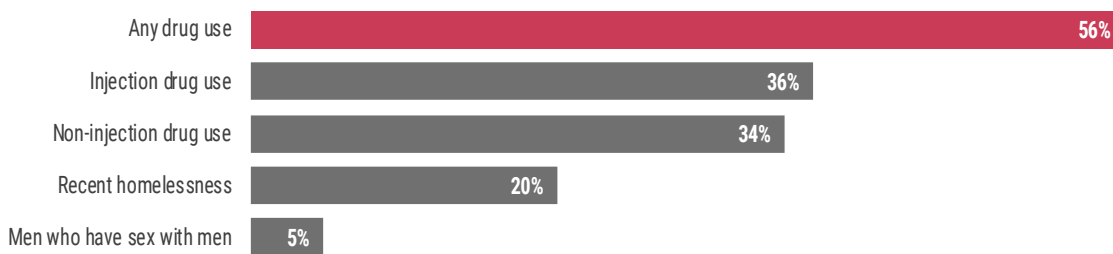
# Hepatitis A Surveillance

## Statewide Response to the Increase in Hepatitis A Cases

Several Florida counties have experienced ongoing local transmission of hepatitis A since 2017. Since January 1, 2018, 98% of Florida's cases (n=4,962) have likely been acquired in Florida. Cases likely acquired in Florida share several common risk factors including drug use (both injection or non-injection drugs), identifying as men who have sex with men, or recently experiencing homelessness. **Individuals with any of these risk factors should receive the hepatitis A vaccine, and health care providers are encouraged to actively offer the hepatitis A vaccine to individuals at risk. Vaccination is the best way to prevent hepatitis A infection.**

For additional information, please see the declaration of public health emergency issued by the State Surgeon General in August 2019, available at: [FloridaHealth.gov/\\_documents/newsroom/press-releases/2019/08/phe-hav-filed-08-01-2019.pdf](https://www.floridahealth.gov/_documents/newsroom/press-releases/2019/08/phe-hav-filed-08-01-2019.pdf).

Over half (62%) of the 4,962 cases likely acquired in Florida since January 1, 2018 reported at least one of the risk factors below, while 38% reported no or unknown risk factors. The most commonly identified risk factor was **drug use**, reported by 2,739 cases (56%). Non-injection (34%) and injection (36%) were both common forms of drug use. Recent homelessness, reported by 20% of cases, was an additional risk factor.



Hepatitis A infections can be severe, leading to inpatient hospitalization and sometimes death. Since January 1, 2018, 3,383 (69%) cases likely acquired in Florida have been hospitalized because of their hepatitis A infection, and there were 76 hepatitis A associated deaths identified.

**69%** hospitalized  
**76** deaths

The Florida Department of Health is actively working to vaccinate those most at risk for hepatitis A infection. In December 2020, **the number of first doses of hepatitis A vaccine administered by both private providers and county health departments to adults age 18 years and older, as recorded in Florida SHOTS**, decreased and was below the **previous 5-year-average**. This may be due to changes in vaccine administration during the COVID-19 pandemic. In December 2020, a total of 3,306 doses were administered. **Vaccination is the best way to prevent hepatitis A infection.**

