




# Hepatitis A Surveillance

## 2018-To-Date Key Points

 5,111 cases

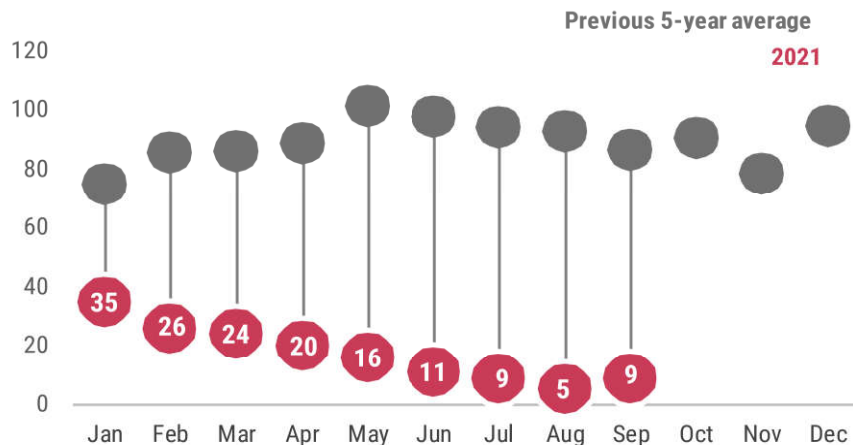
 23% cases linked to other cases

 Since 2018, 30-39 year olds have had the highest incidence rate

 25% co-infected with hepatitis B or C

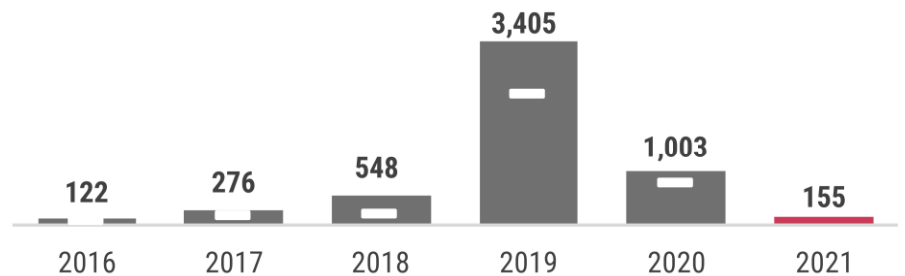


**The number of reported hepatitis A cases in September increased from the previous month and was below the previous 5-year average.** Since January 1, 2018, 98% of cases have likely been acquired in Florida. In September, 9 hepatitis A cases were reported in 7 counties. The Hepatitis outbreak in Florida was declared over as of August 31, 2021.



**Since January 1, 2021, 155 hepatitis A cases were reported.**

Consistent with the national hepatitis A outbreak, cases increased dramatically during 2018 and 2019 in Florida. In September 2021, there was a 97% decrease in overall cases when compared to cases as of September 2019.



\*The white bars indicate the total number of cases as of September for each year



**97%**

**never vaccinated**

**The best way to prevent hepatitis A infection is through vaccination.** Since January 1, 2018, 97% of people with hepatitis A had never received a documented dose of hepatitis A vaccine. In September 2021, 98% of infected people had not received the vaccine or had unknown vaccination status. Since 2006, hepatitis A vaccine has been recommended for all children at age 1 year. Hepatitis A vaccine is also recommended for certain adult high-risk groups, including persons using injection and non-injection drugs, 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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Since 2018, **1,154 (23%)** of 5,111 hepatitis A cases were **epidemiologically (epi) linked to other cases**. In September 2021, **1 case** was epi-linked to other cases.

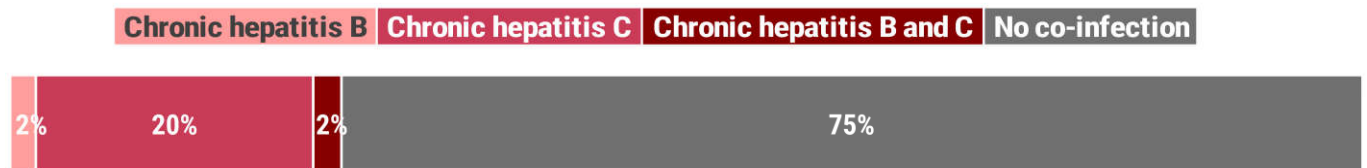
In September 2021, there was an **average of 2 contacts per case**. Contacts are those who were exposed to the virus and recommended prophylaxis for illness prevention.



Since 2018, **incidence rates have increased among all age groups** with cases reported primarily among **men (64%)** and persons who identify as **non-Hispanic white (82%)**. As of September 2021, **30-39 year olds had the highest incidence rate at 1.7 cases per 100,000 population**.



Since 2018, **96 cases (2%)** were co-infected with chronic hepatitis B, **1,047 cases (20%)** were co-infected with chronic hepatitis C, and **110 cases (2%)** were co-infected with both chronic hepatitis B and C. In September 2021, no cases were co-infected with chronic hepatitis B or C. Co-infection with more than one type of viral hepatitis can lead to more severe liver disease and increase the risk of **developing liver cancer**.



## National activity

Hepatitis A rates have decreased by more than 95% since the first vaccine became available in 1995. However, since outbreaks were first identified in 2016, the Centers for Disease Control and Prevention has been monitoring outbreaks in 36 states. More information about these outbreaks can be found here: [www.cdc.gov/hepatitis/outbreaks/2017March-HepatitisA.htm](http://www.cdc.gov/hepatitis/outbreaks/2017March-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.

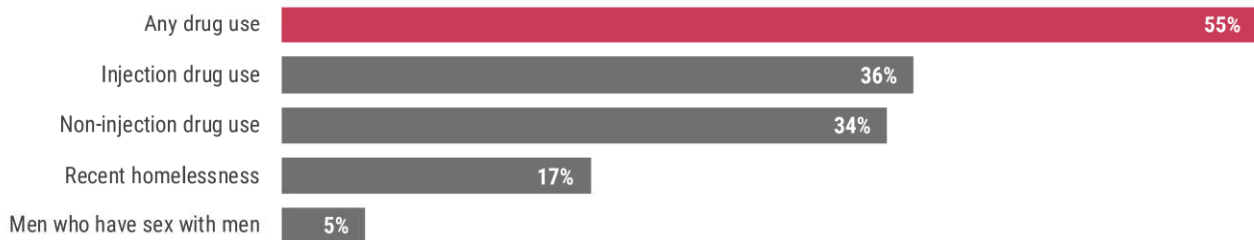
# Hepatitis A Surveillance

On August 31, 2021, Florida announced the end of the hepatitis A outbreak due to a decline in reported cases. During the past 3 months, case numbers have returned to baseline incidence in Florida prior to the outbreak. Ongoing local transmission of hepatitis A was initially reported in 2017 and declared an outbreak on January 1, 2018 with a public health emergency issued by the State Surgeon General in August 2019. Since 2018, 98% of Florida's cases (n=5,111) have likely been acquired in Florida and share common risk factors including drug use (both injection or non-injection drugs), recent homelessness, and men who have sex with men. Hepatitis A activity will continue to be monitored.

**Vaccination is the best way to prevent hepatitis A infection. Health care providers are encouraged to actively offer the hepatitis A vaccine to individuals at risk.**

For additional information, please see: <http://www.cdc.gov/hepatitis/outbreaks/2017March-HepatitisA.htm>

Since 2018, over half (61%) of the 5,111 cases acquired in Florida reported at least one of the risk factors below, while 39% reported no or unknown risk factors. The most commonly identified risk factor was **any drug use**, reported by 2,806 cases (55%). Injection (36%) and non-injection (34%) were both common forms of drug use reported, followed by recent homelessness (17%).



Hepatitis A infections can be severe, leading to inpatient hospitalization and sometimes death. Since January 1, 2018, 3,477 (68%) cases acquired in Florida have been hospitalized due to hepatitis A infection with 77 deaths identified as hepatitis A associated.

**68%** hospitalized  
**77** deaths

The Florida Department of Health is actively working to vaccinate those most at risk for hepatitis A infection. In September 2021, 2,613 doses were administered. **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. **Vaccination is the best way to prevent hepatitis A infection.**

