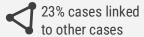
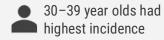
Hepatitis A Surveillance

2018-To-Date Key Points



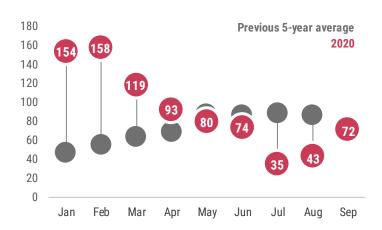




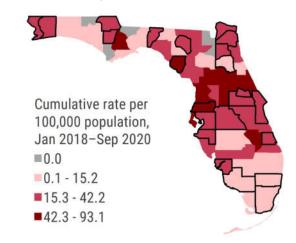




The number of reported hepatitis A cases in September increased from the previous month and was similar to the previous 5-year-average. The number of cases has been increasing in recent months. ▼

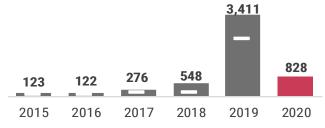


The 72 hepatitis A cases in July were reported in the **23 counties outlined in black**. The central Florida region had the highest hepatitis A activity levels. Since January 1, 2018, 98% of cases have likely been acquired locally in Florida.



From January 1, 2020 through September 30, 2020, 828 hepatitis A cases were reported.

The number of reported hepatitis A cases dramatically increased since January 2018, after remaining relatively stable in previous years. In recent months, case counts have decreased from case counts seen in 2019.



*The white bars in the graph indicates total numbers in September for each year



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 September 2020, 96% 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 highrisk 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.

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.



Hepatitis A Surveillance



From January 2018 to September 2020, 1,111 (23%) of 4,787 total cases of hepatitis A were epidemiologically (epi) linked to other cases. In September 2020, 3% of cases were linked to other cases.

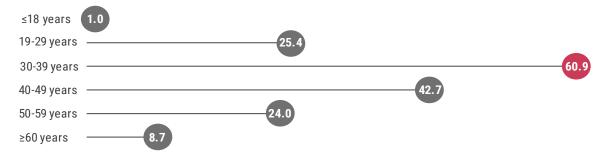
2018-20 **1,111 4,787**Sep 2020 **8 72**

Epi linked cases | Total cases

In September 2020, 63% of epi links were household contact, 13% were sexual contacts, and 25% were personal contacts.

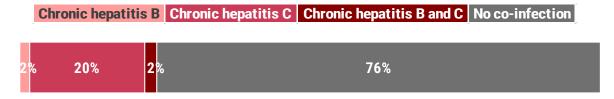


Since January 1, 2018, the incidence rate was highest among adults aged 30–39 years old at 60.9 cases per 100,000 population. In September 2020, the incidence rate was highest among adults aged 30–39 years old at 1 case per 100,000 population. Since January 1, 2018, cases were reported primarily among men (64%) and persons who identify as non-Hispanic white (93%).





Since January 1, 2018, 84 (2%) cases were co-infected with chronic hepatitis B, 949 (20%) cases were co-infected with chronic hepatitis C, and 99 (2%) cases were co-infected with both chronic hepatitis B and C. In September 2020, 19 (26%) cases 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.





National activity

Hepatitis A rates have decreased by more than 95% since the first vaccine became available in 1995. However, since May of 2017, the Centers for Disease Control and Prevention has been monitoring outbreaks in 33 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

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. For more information on the data sources used in Florida for hepatitis A surveillance, see the last page of this report.

Hepatitis A Surveillance

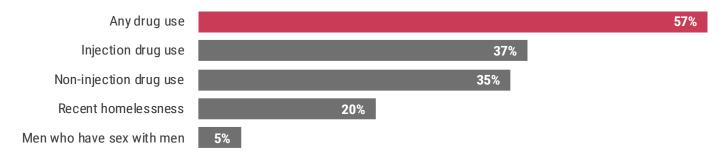
Statewide Response to the Increase in Hepatitis A Cases

Several Florida counties have experienced ongoing local transmission of hepatitis A since 2017. Since January 1, 2018, 98% of Florida's cases (n=4,787) 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.



Over half (62%) of the 4,787 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 2,679 (57%) cases. Non-injection (35%) and injection (37%) 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, 3,267 (69%) cases likely acquired in Florida have been hospitalized because of their hepatitis A infection, and there were 70 hepatitis A associated deaths identified.

69% 70 hospitalized deaths



The Florida Department of Health is actively working to vaccinate those most at risk for hepatitis A infection. In September, 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, increased slightly and was below the previous 5-year-average in September 2020. This may be due to changes in vaccine administration during the COVID-19 pandemic. In September 2020, a total of 3,747 doses were administered. Vaccination is the best way to prevent hepatitis A infection.

