# Hepatitis A Surveillance

### **April Key Points**



1,008	203	319	100	121	58
2020	2021	2022	2023	2024	2025

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

The best way to prevent hepatitis A infection is through vaccination. In April 2025, 69% of cases were not upto-date on hepatitis A vaccinations and 19% 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.



## **Hepatitis A Surveillance**

In April 2025, three cases were epidemiologically (epi) linked to another case. From January to April 2025, seven cases were epidemiologically (epi) linked to another case.

In April 2025, there was an average of **1 contact to reported cases.** Contacts are those who were exposed to the virus and recommended prophylaxis for illness prevention.





In April 2025, 30-39 year olds have the highest incidence rate at 0.197 cases per 100,000 population.



In April 2025, 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 37 states. More information about these outbreaks can be found here: <a href="https://www.cdc.gov/hepatitis/outbreaks/2017May-HepatitisA.htm">www.cdc.gov/hepatitis/outbreaks/2017May-HepatitisA.htm</a>

#### Hepatitis A surveillance goals

- Identify cases to limit transmission
- Identify and prevent outbreaks
- · Monitor effectiveness of immunization programs and vaccines

To learn more about hepatitis A, please visit <u>FloridaHealth.gov/diseases-and-conditions/vaccine-preventable-disease/hepatitis-a</u>. For more information on the data sources used in Florida for hepatitis A surveillance, see the last page of this report.

## **Hepatitis A Surveillance**

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 including men who have sex with men.

For more information about hepatitis A vaccination in Florida visit: <u>https://www.floridahealth.gov/diseases-and-conditions/</u> <u>hepatitis/hepatitis-vaccination-testing-program.html</u>

In 2025, the most common risk factors identified were travel outside of the U.S. (50%), men who have sex with men (17%), any drug use (3%), and non-injection drug use (2%).



Hepatitis A infections can be severe, leading to inpatient hospitalization and sometimes death. In 2025, 35 cases (60%) reported in Florida have been hospitalized due to hepatitis A infection. No deaths have been identified as hepatitis A associated in 2025.

The Florida Department of Health is actively working to vaccinate those most at risk for hepatitis A infection. In April 2025, 5,409 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, increased and was above the previous 5-year-average. Vaccination is the best way to prevent hepatitis A infection.

