

The Commonwealth of Massachusetts

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TO: Emergency Departments in Massachusetts

FROM: Larry Madoff, MD Director, Division of Epidemiology and Immunization

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RE: Hepatitis A virus infection in persons experiencing homelessness and substance use disorder

Massachusetts is currently experiencing an outbreak of hepatitis A virus (HAV) infection in persons experiencing homelessness and in those with substance use disorder. HAV infection is a vaccine-preventable communicable disease that is easily spread through close contact, as well as from sharing injection and non-injection drugs. To help control the outbreak, we are asking emergency departments to vaccinate all at-risk individuals and to help identify cases.

Background: Since April 2018, more than 80 cases of acute hepatitis A virus (HAV) infection have been reported to the Massachusetts Department of Public Health (MDPH) among individuals who have recently experienced homelessness, unstable housing, and/or substance use disorder. This includes users of both injecting and non-injecting drugs. Prior to this, Massachusetts had been averaging 50 cases of HAV infection annually.

Of the HAV cases reported to date, almost half have occurred in the City of Boston. However, an increasing number of cases are being reported in other cities and towns across the Commonwealth. Many of the cases have complex medical issues, including co-infection with hepatitis C virus (80%) and HIV (7%). There has been high morbidity with 91% of cases requiring hospitalization and one death.

The Centers for Disease Control and Prevention (CDC) has been tracking similar, although much larger, outbreaks in multiple states in these populations since 2017, raising concern that the current outbreak in Massachusetts could continue to expand (<u>https://www.cdc.gov/hepatitis/outbreaks/2017March-HepatitisA.htm</u>).

For many individuals in this population, emergency departments may be their only point of contact with the healthcare system. **MDPH will host a teleconference with Emergency Department representatives on Monday, October 15 at noon. The conference number is 888-324-9618 and passcode is PUBLICHEALTH.**

We are asking emergency departments to assist in control of this outbreak by:

- 1. **Identifying** patients at risk of hepatitis A including those who are unstably housed or experiencing homelessness (whether residing in a shelter or not), those with substance use disorder and those with recent contact with the correctional system. Other groups at risk include men who have sex with men (MSM), and recent contacts of HAV cases.
- 2. Vaccinating all identified at-risk persons with a single dose of hepatitis A vaccine (HAVRIX or VAQTA) unless there is evidence of previous vaccination or immunity. A single dose of vaccine rapidly provides 95% seroprotection from infection; this protection lasts at least 11 years and has been demonstrated to curb outbreaks. There is no need to test for immunity prior to vaccination. Vaccination should not be delayed if prior documentation of immunization cannot be obtained quickly.
- 3. **Maintaining a high index of suspicion** for hepatitis A in members of these populations who may present with nonspecific signs of illness including fever, malaise, anorexia, and diarrhea, all of which may occur before more specific signs such as jaundice. Identifying infected patients by obtaining HAV IgM antibody testing allows for timely outbreak control efforts. Positive HAV antibody tests are automatically reported electronically to MDPH by all clinical laboratories in Massachusetts. Note that HAV total antibody tests are not useful for diagnosing acute HAV infection.

Given the current HAV outbreak, we believe that vaccination of at-risk individuals is clinically indicated and generally should be covered by insurers, including MassHealth. For specific questions on coverage, providers should contact the individual's insurer. <u>Although DPH encourages hospitals to purchase and bill for the cost of hepatitis A vaccine when feasible, cost should not be a barrier to ensuring that all high risk individuals are offered hepatitis A vaccine. Therefore, DPH will be making allocations of statesupplied adult hepatitis A vaccine available to all emergency departments for vaccination of high-risk individuals who are either uninsured or underinsured (insurance coverage does not adequately cover the cost of vaccination). Hospitals that are already enrolled in the DPH Immunization Program can order vaccines through their normal mechanism via the Massachusetts Immunization Information System (MIIS) – consult with your hospital pharmacy that can place these vaccine orders on your behalf. For hospitals not currently enrolled in the Immunization Program please contact the DPH Vaccine Management Unit at 617-983-6828. Emergency departments should consider maintaining stocks of hepatitis A vaccine directly within the emergency department to facilitate vaccination. Encouraging individuals to seek a follow-up dose from their primary care or other provider after 6 or more months to complete the vaccine series is a best practice, but is not necessary to interrupt transmission.</u>

For questions regarding this outbreak or management of individual situations, please contact the MDPH Epidemiology staff (24/7) at 617-983-6800

Link to MDPH Hepatitis A website: http://www.mass.gov/hepatitis-a