



4/23/2019

** NOTICE: This health alert provides written guidance for health care professionals and others who may need to take action to prevent or control a notifiable condition. It is not intended to provide guidance for the general public.*

1) Influenza-related Masking No Longer Recommended and 2) Locally-acquired Acute Hepatitis A in a Person Living Homeless in Seattle

Actions Requested:

Influenza-related Masking No Longer Recommended

- **Discontinue the masking of staff in health care facilities** who were unable or unwilling to receive flu vaccine during this influenza season. Based on the review of surveillance data and after touching base with partners we are aware that there is reduced influenza activity. The Thurston, Mason, Lewis Infection Control Network recommends facilities discontinue masking.
- **Continue reporting unexplained critical illnesses or deaths associated with influenza**

2) Locally-acquired Acute Hepatitis A in a Person Living Homeless in Seattle -

Please be aware that Public Health Seattle & King County has identified a case of locally-acquired acute Hepatitis A virus in an adult who is living homeless. The individual is thought to have been infectious from March 25th through April 19th and spent significant time in locations including the Jefferson Day Center (Salvation Army), Victoria Outreach Church, Seattle City Hall Shelter, Seattle’s 3rd Avenue corridor (“The Blade”).

Transience, economic instability, limited access to healthcare, distrust of public officials and public messages, and the lack of contact information for follow-up makes those living homeless difficult to reach to offer preventive services and control the spread of Hepatitis A infection. Preventive services may include vaccination, exchanging used injection equipment for sterile injection equipment, case management and contact tracing. Challenges make outbreaks among these groups difficult to control once they start.

Actions Requested:

- Consider Hepatitis A Virus infection in patients with jaundice and clinically compatible symptoms; fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, dark urine, clay-colored stools, joint pain, and jaundice.
- Collect specimens for laboratory testing on patients with suspected Hepatitis A infections:
 - o Serum for hepatitis A IgM and liver enzymes (including ALT, AST).
 - o Consider testing for hepatitis B (HBsAg and IgM) and hepatitis C (antibody/EIA) virus infections.
- Ask patients about risk factors, homelessness or unstable housing, sexual history, travel history, injection and non-injection drug use, contact with other ill persons, and obtain information about potentially exposed household members and other contacts.
- Educate patients with Hepatitis A virus infection that they are most contagious (fecal-oral route) for 2 the weeks before through 1 week after the onset of jaundice and may be infectious longer if they have persistent diarrhea.

COMMUNICABLE DISEASE UPDATE

COMMUNICABLE DISEASE CONTROL AND PREVENTION SECTION
 THURSTON COUNTY PUBLIC HEALTH AND SOCIAL SERVICES DEPARTMENT
 412 LILLY RD NE
 OLYMPIA, WA, 98506-5132
 DISEASE REPORTING: (360)786-5470 INFORMATION: (360) 867-2533
 Rachel Wood, MD, MPH, Health Officer



4/23/2019

- Hepatitis A postexposure prophylaxis (PEP) recommendations vary by age and health status, see links below.
- Routinely offer and/or recommend Hepatitis A vaccine to persons at increased risk, including those living homeless, and educate patients regarding risk for Hepatitis A infection. Offer Hepatitis A vaccine to anyone who wishes to reduce their risk of infection.
- Exclude individuals you suspect or confirm as having Hepatitis A virus infection from food handling, child care or healthcare, or attending school or child care until diarrhea resolves and it is 7 days after onset of jaundice, unless other restrictions apply
- **Report confirmed and suspected Hepatitis A virus infections** to Public Health at (360) 786-5470.

Local Efforts

The Olympia Free Clinic and Valley View Health Center through the Providence Community Care Clinic and Thurston County Public Health and Social Services Department - Housing, Disease Control and Prevention, and Medical Reserve Corp through a partnership are continuing to provide outreach activities offering hepatitis A vaccinations and education to the homeless, street dependent and drug using populations.

Resources:

CDC Hepatitis A Outbreaks - <https://www.cdc.gov/hepatitis/outbreaks/2017March-HepatitisA.htm>

CDC Vaccine recommendations for outbreaks - <https://www.cdc.gov/hepatitis/outbreaks/InterimOutbreakGuidance-HAV-VaccineAdmin.htm>

CDC General hepatitis information - <https://www.cdc.gov/hepatitis/hav/index.htm>

CDC hepatitis A vaccine recommendations: <https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/hepa.html>

CDC hepatitis A information for healthcare providers including updated PEP recommendations: <https://www.cdc.gov/hepatitis/hav/havfaq.htm>

DOH Notifiable Conditions and Posters -

<https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/NotifiableConditions/ListofNotifiableConditions>

THANK YOU FOR REPORTING - WE COULDN'T DO THIS WORK WITHOUT YOU

TO REPORT A NOTIFIABLE CONDITION IN THURSTON COUNTY	
Voice mail for reporting non-immediately reportable conditions (24 hours a day)	Phone: 360-786-5470 Fax: 360-867-2601
Immediately and 24-hour reportable conditions or a public health emergency – during business hours	Call 360-867-2500 and ask staff to locate Communicable Disease staff
Immediately and 24-hour reportable conditions or a public health emergency – after business hours	Call 911 and ask staff to locate the Health Officer.
If no one is available with Thurston County Public Health and condition is immediately notifiable	Call 1-877-539-4344