

## Hepatitis E Virus (HEV) Fact Sheet

(adapted from materials developed by the Centers for Disease Control and Prevention)

<b>Report to Iowa Dept. of Public Health</b>	<ul style="list-style-type: none"> <li>• Tests for the hepatitis E virus (HEV) are not yet FDA approved; however, these tests can be accessed through referral for patients with clinical symptoms of viral hepatitis when other viral etiologies (HAV, HBV, HCV, HDV, CMV, EBV) have been ruled out.</li> <li>• Diagnosis of HEV would be more likely in persons with a history of travel to endemic regions outside the U.S.</li> <li>• Contact the Iowa Department of Public Health if you suspect a case of HEV by any of the following methods:             <ul style="list-style-type: none"> <li>○ Phone: 515.281.5027</li> <li>○ Fax: 515.281.4570</li> <li>○ Mail: Iowa Department of Public Health / Bureau of Immunization 321 East 12th Street Des Moines, Iowa 50319</li> </ul> </li> </ul>
<b>Etiology</b>	<ul style="list-style-type: none"> <li>• HEV is a spherical, non-enveloped, positive-strand RNA virus.</li> </ul>
<b>Signs and Symptoms</b>	<ul style="list-style-type: none"> <li>• Persons with HEV infection may be asymptomatic.</li> <li>• Symptoms are those associated with other types of viral hepatitis: jaundice, malaise, anorexia, fever, diarrhea, abdominal pain, and arthralgia.</li> <li>• Symptom severity increases with age.</li> <li>• High case-fatality rate among pregnant women.</li> <li>• Incubation period is typically 40 days (range: 15 to 60 days).</li> </ul>
<b>Long-Term Effects</b>	<ul style="list-style-type: none"> <li>• There is no known chronic (long-term) infection.</li> </ul>
<b>Transmission</b>	<p>Fecal-oral route by either:</p> <ul style="list-style-type: none"> <li>• ingestion of contaminated food or water, or</li> <li>• person-to-person contact (less common)</li> </ul>
<b>Communicability</b>	<ul style="list-style-type: none"> <li>• The period of communicability after acute infection is unknown, but fecal shedding of the virus and viremia commonly occur for at least two weeks.</li> </ul>
<b>Risk Groups</b>	<ul style="list-style-type: none"> <li>• Travelers to parts of Asia, Africa, and Mexico (not endemic in the U.S.)</li> <li>• More common among adults than children</li> </ul>
<b>Prevention</b>	<ul style="list-style-type: none"> <li>• Travelers to HEV-endemic regions should avoid drinking water (and beverages with ice) of unknown purity, uncooked shellfish, and unpeeled fruit and vegetables not prepared by traveler.</li> <li>• Vaccine is not yet available.</li> </ul>
<b>Treatment &amp; Medical Management</b>	<ul style="list-style-type: none"> <li>• Supportive care</li> </ul>
<b>Postexposure Management</b>	<ul style="list-style-type: none"> <li>• None; immune globulin (IG) prepared in the United States does not prevent HEV infection.</li> </ul>
<b>Trends &amp; Statistics</b>	<ul style="list-style-type: none"> <li>• HEV is rarely reported in the United States and most reported cases have occurred among travelers to endemic regions.</li> <li>• Rarely, a "U.S. strain" of HEV has been reported among persons with no recent history of travel outside of the United States.</li> </ul>
<b>References</b>	<ul style="list-style-type: none"> <li>• <a href="http://www.cdc.gov/ncidod/diseases/hepatitis/e/index.htm">http://www.cdc.gov/ncidod/diseases/hepatitis/e/index.htm</a> (CDC web site on HEV)</li> <li>• Pickering L, eds. "Red Book 2000 Report of the Committee on Infectious Diseases, 25th ed." 2000, American Academy of Pediatrics.</li> </ul>