

# Hepatitis A, B and C Summary

Disease	Ways the viruses are spread	Course and outcome of infection	Vaccine/ Post Exposure Prophylaxis (PEP)
<b>Hepatitis A</b>	<p><b>Oral-faecal</b></p> <p>Infection occurs when faeces containing the virus are transferred to another person's mouth. In Australia most infections are associated with:</p> <ul style="list-style-type: none"> <li>&gt; contaminated food, drink and eating utensils</li> <li>&gt; hands contaminated by an infected person via nappies, toys or towels soiled with faeces</li> <li>&gt; oral/anal sexual contact</li> <li>&gt; sewage-contaminated water or shellfish</li> <li>&gt; travel to countries with endemic hepatitis A</li> <li>&gt; illicit drug use</li> </ul> <p>Inadequate personal hygiene is responsible for most person-to-person spread</p>	<p><b>Acute infection*</b></p> <p>Symptoms occur in less than 10% of young children and in 40-70% of adults who become infected</p> <p><b>Chronic infection**</b></p> <p>Does not occur in hepatitis A infection</p>	Yes
<b>Hepatitis B</b>	<p><b>Blood-to-blood and sexual contact</b></p> <p>Most infections in Australia are associated with:</p> <ul style="list-style-type: none"> <li>&gt; immigration from a high prevalence country</li> <li>&gt; sharing injecting equipment</li> <li>&gt; unprotected sex</li> <li>&gt; mother-to-baby transmission at or around the time of birth</li> <li>&gt; child-to-child contact</li> <li>&gt; tattooing or body piercing</li> <li>&gt; household contact – sharing razors and toothbrushes</li> <li>&gt; receiving blood or blood products before screening from 1971</li> </ul>	<p><b>Acute infection*</b></p> <p>Symptoms occur in up to 50% of adults in the period 2 to 3 months after infection</p> <p><b>Chronic infection**</b></p> <p>Develops in:</p> <ul style="list-style-type: none"> <li>&gt; 5-10% of people infected as adults</li> <li>&gt; 30-50% of children infected under 4 years of age</li> <li>&gt; 90% of infants infected in the perinatal period</li> </ul>	Yes
<b>Hepatitis C</b>	<p><b>Blood-to-blood contact</b></p> <p>Most infections in Australia are associated with:</p> <ul style="list-style-type: none"> <li>&gt; immigration from a high prevalence country</li> <li>&gt; sharing injecting equipment</li> <li>&gt; receiving blood or blood products before screening from 1990</li> <li>&gt; tattooing, body piercing or acupuncture</li> <li>&gt; being a prisoner</li> </ul>	<p><b>Acute infection*</b></p> <p>15-25% of people will develop symptoms which are usually mild and may include jaundice</p> <p><b>Chronic infection**</b></p> <p>50-80% of people remain chronically infected. 25% of this group will develop scarring of the liver (cirrhosis)</p>	No

\* Acute infection – the early weeks or months after infection has occurred. Symptoms may include abdominal discomfort, nausea, fever, fatigue, sometimes followed by jaundice (yellow skin and eyes)

\*\* Chronic infection – there may be no symptoms but the person remains infected. Chronic infection may lead to cirrhosis, liver failure or liver cancer in some people