



## Communicable Disease Case Reporting and Investigation Protocol **HEPATITIS E**

### I. IDENTIFICATION AND DEFINITION OF CASES

- A. **Clinical Description:** An illness caused by the hepatitis E virus (HEV) typically characterized by onset of fever, malaise, nausea, abdominal discomfort, fatigue, and elevated serum aminotransferase levels; often followed within a few days by jaundice. Severity of illness is variable and similar to hepatitis A except that hepatitis E acquired during pregnancy can have a 10%-20% case-fatality rate.
- B. **Laboratory Criteria:** Positive anti-HEV IgM serology
- C. **Wisconsin Surveillance Case Definition:** A person who is laboratory confirmed and meets **all** of the following three criteria:
  - 1. Discrete onset of signs and symptoms consistent with acute hepatitis.
  - 2. Elevated ALT (SGPT) levels greater than 5 times the upper limit of normal.
  - 3. Negative serologic test for IgM antibody to hepatitis A virus (IgM anti-HAV) **and** negative test for IgM antibody to hepatitis B virus core antigen (IgM anti-HBc), **and** negative test for hepatitis C antibody.

### II. REPORTING

- A. **Wisconsin Disease Surveillance Category II – Methods for Reporting:** This disease shall be reported to the patient's local health officer or to the local health officer's designee within 72 hours of recognition of a case or suspected case, per Wis. Admin. Code § [DHS 145.04 \(3\) \(b\)](#). Report electronically through the Wisconsin Electronic Disease Surveillance System (WEDSS), or mail or fax a completed Acute and Communicable Disease Case Report ([F-44151](#)) to the address on the form.
- B. **Responsibility for Reporting:** According to Wis. Admin. Code § [DHS 145.04\(1\)](#), persons licensed under Wis. Stat. ch. [441](#) or [448](#), laboratories, health care facilities, teachers, principals, or nurses serving a school or day care center, and any person who knows or suspects that a person has a communicable disease identified in [Appendix A](#).
- C. **Clinical Criteria for Reporting:** Clinical diagnosis with confirmatory laboratory results
- D. **Laboratory Criteria for Reporting:** Detection of anti-HEV IgM antibody

### III. CASE INVESTIGATION

- A. **Responsibility for case investigation:** It is the responsibility of the local health department (LHD) to investigate or arrange for investigation of suspected or confirmed cases as soon as is reasonably possible. A case investigation may include information collected by phone, in person, in writing, or through review of medical records or communicable disease report forms, as necessary and appropriate.

Briefly, case investigation consists of obtaining a detailed travel history, sources of drinking water, and history of animal contact or consumption of uncooked/undercooked pork for 60 days prior to illness onset.

- B. **Required Documentation:** Complete the WEDSS disease incident investigation report. Information on travel history, drinking water, and animal contact can be placed into the "remarks" section of the WEDSS record or saved into the WEDSS file cabinet. Upon completion of investigation, set WEDSS disease incident process status to "Sent to State."
- C. **Additional Investigation Responsibilities:** None

### IV. PUBLIC HEALTH INTERVENTIONS AND PREVENTION MEASURES

- A. In accordance with Wis. Admin. Code § [DHS 145.05](#), local public health agencies should follow the methods of control recommended in the current editions of *Control of Communicable Diseases Manual*, edited by David L.

Heymann, published by the American Public Health Association, and the American Academy of Pediatrics' *Red Book: Report of the Committee on Infectious Diseases*, unless otherwise specified by the state epidemiologist.

- B. Educate travelers to developing countries, especially pregnant women, about the potential risks involved with questionable water supplies and the consumption of potentially contaminated raw fruits and vegetables, and of uncooked/undercooked pork or deer meat.

## **V. CONTACTS FOR CONSULTATION**

- A. Local health departments and tribal health agencies:  
<https://www.dhs.wisconsin.gov/lh-depts/index.htm>
- B. Bureau of Communicable Diseases, Communicable Diseases Epidemiology Section: 608-267-9003
- C. Wisconsin State Laboratory of Hygiene: 1-800-862-1013

## **VI. RELATED REFERENCES**

- A. Heymann DL, ed. Hepatitis E. In: *Control of Communicable Diseases Manual*. 20th ed. Washington, DC: American Public Health Association, 2015: 270–272.
- B. Pickering LK, ed. Hepatitis E. In: *Red Book: 2015 Report of the Committee on Infectious Diseases*. 30th ed. Elk Grove Village, IL: American Academy of Pediatrics, 2015:431-432.
- C. Centers for Disease Control and Prevention website: <https://www.cdc.gov/hepatitis/hev/index.htm>