# Australian Indigenous HealthReviews

From the Australian Indigenous HealthInfoNet





#### Introduction

Hepatitis is an inflammation of the liver and has numerous causes, including viral infection, alcohol or drug abuse, and the body's immune system attacking itself. It can be a short-term, acute illness or a persistent, chronic disease. A number of viruses are responsible for viral hepatitis, with types A, B, and C being the most common (types D through G have been identified also). Each virus causes a different manifestation of disease and each is transmitted in different ways.

## Hepatitis A

Cause - infection with the hepatitis A virus (HAV), an enterovirus transmitted principally through person-to-person contact, and also through food and water contaminated with faecal matter from an infected individual. Eating shellfish taken from contaminated water is another known route of infection.

*Symptoms* - typically mild, though often more serious in adults than children, symptoms can include fever, jaundice (yellowing of the skin and eyeballs), vomiting, and generalised aches. Infected individuals may also notice a darkening of the urine and palecoloured stools.

*Duration* - symptoms typically improve within three weeks, but can persist for several months.

*Prevention* - a safe vaccine exists and is highly recommended for at-risk individuals, including those who travel and are exposed to water of questionable quality. Thorough handwashing with soap and warm water is the most effective preventive measure.

Treatment - no specific treatment exists.

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More detailed information about hepatitis (types A and B) in Indigenous people can be found at:

http://www.healthinfonet.ecu.edu.au/hepatitis\_ab\_review





## Hepatitis B

Cause - infection with the hepatitis B virus (HBV). Transmission occurs due to contact with blood and other body fluids (semen, vaginal fluids, and saliva) from an infected individual, commonly through sexual contact or use of contaminated injecting equipment. A mother may also transmit HBV to the foetus during pregnancy.

Symptoms - only one-third of people acutely infected with HBV will experience obvious symptoms, including jaundice, loss of appetite and mild flu-like symptoms, including fever, fatigue, headache, nausea, and vomiting. HBV can cause a more prolonged illness in which a person may look and feel well, but slowly develop severe liver damage. Patients may develop pain in the joints, especially in the hands. The risk of developing cancer of the liver is also increased in people with chronic HBV infection. Carriers of HBV may also become infected with the hepatitis D virus (HDV) through similar methods, which increases the probability of dramatic damage to the liver.

Duration - HBV infection can last for a variable amount of time, depending on how well the body is able to fight off the infection. Approximately 90 percent of adults will recover spontaneously within 6 months. Infected individuals can become 'carriers' - people with long term infections but few symptoms. This occurs in approximately 10% of adults infected and up to 90% of infants. About one-quarter of those who become carriers will develop chronic liver disease.

Prevention - a number of safe and effective vaccines exist for protection against HBV infection and may be provided free of charge. Vaccination is recommended for all infants at birth. Additionally, safe sex precautions should always be taken, especially the use of a lubricated latex condom during each sexual encounter. Injecting equipment, razors, or any other objects that may contact another person's blood should never be shared.

*Treatment* - primarily designed to reduce liver damage or boost the body's natural defences. Treatments for chronic HBV infection include the drug known as Interferon, sometimes used in combination with other drugs, especially ribavarin. Acute HBV infection has no treatment, but in both acute and chronic conditions it is important for the patient to limit alcohol consumption to one or fewer drinks per day (preferably abstaining altogether) and avoid taking medications not specifically recommended by a physician.

This information was compiled with the help of a number of Fact Sheets available through various reliable sources including:

US Center for Disease Control and Prevention - http://www.cdc.gov/hepatitis/index.htm

WebMD - http://www.webmd.com/

Hepatitis Foundation International - http://www.hepfi.org/







The Australian Indigenous HealthInfoNet is an innovative Internet resource that contributes to 'closing the gap' in health between Indigenous and other Australians by informing practice and policy in Indigenous health.

Two concepts underpin the HealthInfoNet's work. The first is evidence-informed decision-making, whereby practitioners and policy-makers have access to the best available research and other information. This concept is linked with that of translational research (TR), which involves making research and other information available in a form that has immediate, practical utility. Implementation of these two concepts involves synthesis, exchange and ethical application of knowledge through ongoing interaction with key stakeholders.

The HealthInfoNet's work in TR at a population-health level, in which it is at the forefront internationally, addresses the knowledge needs of a wide range of potential users, including policy-makers, health service providers, program managers, clinicians, Indigenous health workers, and other health professionals. The HealthInfoNet also provides easyto-read and summarised material for students and the general community.

The HealthInfoNet encourages and supports informationsharing among practitioners, policy-makers and others working to improve Indigenous health - its free on line yarning places enable people across the country to share information, knowledge and experience. The HealthInfoNet is funded mainly by the Australian Department of Health and Ageing. Its award-winning web resource (www. healthinfonet.ecu.edu.au) is free and available to everyone.

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**CORE FUNDING** 



Department of Health and Ageing

