

Appendix B: Provincial Case Definitions for Reportable Diseases

Disease: Hepatitis A

Hepatitis A

1.0 Provincial Reporting

Confirmed and probable cases of disease

2.0 Type of Surveillance

Case-by-case

3.0 Case Classification

3.1 Confirmed Case

Laboratory confirmation of infection, in the absence of recent vaccination, with detection of Immunoglobulin M (IgM) antibody to Hepatitis A virus (anti-HAV),
AND:

- Acute illness with discrete onset of symptoms and jaundice or elevated serum aminotransferase levels

OR

- An epidemiologic link to laboratory-confirmed case

3.2 Probable Case

Acute illness in a person with an epidemiologic link to a laboratory-confirmed case

4.0 Laboratory Evidence

4.1 Laboratory Confirmation

The following will constitute a confirmed case of Hepatitis A:

- Positive for HAV IgM antibody

4.2 Approved/Validated Tests

- Tests for anti-HAV IgM antibody

4.3 Indications and Limitations

- Anti-HAV IgM results should be repeated in duplicate and should include testing for anti-HAV total antibody. If the anti-HAV total is negative then the initially reactive anti-HAV IgM result should be considered "false positive".
- IgM positive results can be a true positive but reflect a remote infection, as HAV-IgM can remain detectable for years after an acute infection due to trailing IgM or the non-disappearance of anti-HAV IgM after recent infection. Acute/recent infection should be confirmed with clinical history symptoms and by repeat titre after a week or so.

5.0 Clinical Evidence

Acute clinical illness is characterized by abrupt fever, malaise, anorexia, nausea and abdominal pain followed by jaundice or elevated aminotransferase levels within a few days.

6.0 ICD Code(s)

6.1 ICD-10 Code(s)

B15.0 Hepatitis A with hepatic coma

B15.9 Hepatitis A without hepatic coma [Hepatitis A (acute) (viral) NOS]

6.2 ICD-9/ICD-9CM Code(s)

070.0 Viral hepatitis A with hepatic coma

070.1 Viral hepatitis A without mention of hepatic coma

7.0 Comments

N/A

8.0 References

- Heymann D, editor. Control of communicable diseases manual. 18th ed. Washington: American Public Health Association; 2004.
- Ministry of Health and Long-Term Care, Public Health Division. iPHIS manual. Toronto, ON: Queen's Printer for Ontario; 2005.
- Nationally Notifiable Diseases Case Definitions with Canadian Public Health Laboratory Network (CPHLN) and Epidemiologic Group Draft Edits. March 2007. Based on case definitions as written in the: Health Canada. Case definitions for diseases under national surveillance. Can Commun Dis Rep. 2000; 26 Suppl 3:i-iv 1-122. Available from <http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/00pdf/cdr26s3e.pdf>.

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