

Prevention of Hepatitis A in Food Service Industries

Overview: What is Hepatitis?

Hepatitis is an infectious viral disease that can take several forms (Hepatitis-A, -B, -C, -D, -E, and -G). The most common forms are Hepatitis-A, Hepatitis-B, and Hepatitis-C. All forms attack the liver to one degree or another. Hepatitis can be particularly hazardous to young children, the elderly, and persons with compromised immune systems. It is estimated that between 125,000 and 200,000 people are infected with Hepatitis-A in the U.S. each year. There are an estimated 100 deaths annually as a result of fulminant Hepatitis. Approximately 33% of Americans have evidence of past infection.

How is Hepatitis Transmitted?

Hepatitis B, C, and D are transmitted by blood or body fluids. Hepatitis A (also called infectious hepatitis) and E are transmitted by ingesting food or water contaminated with human waste (feces). (Hepatitis E is not considered a problem in the United States.) The U.S. Food and Drug Administration (FDA) estimates that approximately 22,700 cases of Hepatitis A (representing 38% of all hepatitis cases) are reported annually in the United States. This poses a special concern for food service industries, because a single infected individual can contaminate large quantities of food and spread the infection to the public. Other employees, particularly if they consume food while at work, are at increased risk of acquiring the virus.

Infection usually occurs when the virus travels from the infected person (usually due to lack of proper handwashing) on to food that will be consumed *without further cooking*. However, common source epidemics from contaminated food and water also occur. The virus is temperature sensitive, and inactivated by complete cooking (boiling at 100 C for one minute or cooking to an internal temperature of 70 C). Therefore, the most vulnerable foods, and those associated with outbreaks, include cold cuts, fruits and fruit juices, milk and milk products, vegetables, salads, shellfish, and iced drinks. Water, shellfish, and salads are the most frequent sources.

The amount of virus passing *from* the infected individual peaks seven to ten days *before the onset of symptoms*. The incubation time (the time from exposure to outbreak of symptoms) is 15-50 days, with an average of 28 days. There exists a vaccine (immune globulin) which, if taken within 14 days after exposure, can reduce the potential for developing the disease.

LOSS CONTROL TIPS

Have a Response Plan Ready

The media attention given to recent outbreaks underscores the potential impact of hepatitis on your business. *Being prepared, and responding quickly, can significantly assist you in controlling an incident.*

STEP ONE: Understand Hepatitis-A

Your employees should clearly understand the disease, its causes, its routes of transmission, and the symptoms of infection. Post warnings in all rest rooms. The posters, which should be multilingual, should stress the need for hand washing and personal hygiene for food handlers. The symptoms of fever, lethargy (tiredness), nausea, dark urine, or abdominal discomfort should trigger concern. Managers and supervisors should know these symptoms and should take action when they become aware of them in any of their employees.

STEP TWO: Understand Controls

The most important form of protection is handwashing to prevent contamination of food by feces. *Employees must be required to wash their hands* when reporting for work, after using the rest room, after breaks, and as necessary during food preparation. The maintenance of *short fingernails* is important to ensure complete cleaning. Ensure the adequacy of handwashing facilities (warm running water, antibacterial soap, single use towelettes). Good hygiene and sanitation practices during food preparation is also essential.

STEP THREE: Have An Adequate Contingency Plan

All managers and supervisors should understand what actions should be taken if employees exhibit symptoms of Hepatitis-A, if they report that they suspect that they may have the disease, or if they are actually diagnosed with the disease. *The need to protect the health of the public and other employees should be considered above all.*

- **If an employee exhibits symptoms**, be supportive and inquire as to how long the employee has had the symptoms and whether or not the employee is under the care of a physician. Use judgment as to whether or not the employee should be removed from food handling duties and/or referred to a physician. Remember that prompt medical care is important to minimize the severity of any illness.
- **If an employee has visited a physician, and is suspected of having Hepatitis-A**, the employee should not return to work, to avoid risk to fellow employees and the public. A written release from the physician should be obtained prior to return. Ask the employee to give permission to the physician to discuss his/her case, so that management can determine what other actions need to be taken to protect fellow employees and the public. If it can be confirmed that the employee does not have Hepatitis-A, no further action is necessary. Pay close attention to other employees who may have contracted the disease from the individual or from the same source that exposed the individual.
- **If an employee is confirmed as having Hepatitis-A**, and it has been less than 14 days since he/she has worked, consult with the treating physician to determine if a second test is warranted, as false positive results are not unheard of. Strongly advise fellow employees to obtain a Hepatitis A vaccine injection to prevent their developing Hepatitis A, and/or an immune globulin injection to lessen the possibility of their developing the disease. Refresh their knowledge of the disease's symptoms and progress. *Employees with even the slightest symptoms should be excluded from work.* If any employees have left employment within the last 14 days, contact them and advise accordingly. All reasonable efforts should be made to minimize the direct handling of food. Strongly consider utensil and glove use. Consult with local public health authorities as to what actions should be taken with the public. Follow their advice exactly. Only after medical release from the treating physician and consultation with public health authorities can the infected employee return to work. All extra precautions should stay in effect for *at least 50 days*. If after this time no other employees appear infected, then controls can be relaxed to normal levels.

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