



County of San Diego

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October 11, 2017

Rima Khabbaz, M.D.
Deputy Director, Office of Infectious Diseases

John Ward, M.D.
Director, Division of Viral Hepatitis

Centers for Disease Control and Prevention
1600 Clifton Road NE
Atlanta, GA 30333

RE: Waterborne Transmission of HAV

Dear Drs. Khabbaz and Ward:

The San Diego County Hepatitis A outbreak, resulting in the recent declaration of a local health emergency, is unprecedented. We are combatting the largest person-to-person hepatitis A virus (HAV) outbreak, since the vaccine was introduced in 1995, with 490 cases and 18 deaths, to date. I would like to thank you and all of the Centers for Disease Control and Prevention (CDC) teams that have been supporting and providing assistance to the San Diego region in this emergency response situation.

Locally, there have been repeated questions and concerns regarding the potential for waterborne transmission of HAV contributing to the current outbreak. CDC Division of Viral Hepatitis staff provided the County Epidemiology Program, with valuable insight on this subject related to 1) the history of waterborne HAV and 2) environmental sampling. I am writing to you to confirm our understanding of the guidance that CDC has provided.

History of Waterborne HAV

There has not been a documented waterborne outbreak of HAV in the United States, in well over 30 years. In the waterborne outbreaks from decades ago, no reported HAV cases have been associated with natural bodies of flowing water (e.g., rivers, beach water). Previous cases were linked to septic seepage into drinking water fountains, or, in one case, a swimming pool that was contaminated by sewage.

Environmental Sampling

Environmental sampling has not been recommended for the current HAV outbreak response in the San Diego region. This outbreak has been determined to be transmitted person-to-person via the fecal-oral route. The epidemiological data of San Diego's HAV outbreak indicates that waterbodies (such as rivers) have not been a source in the initial infection or continued transmission. Therefore, water sampling efforts would not provide any additional information for addressing the continued transmission of HAV. If the environment is ever thought to be contributing to San Diego's HAV outbreak transmission (i.e., a case cluster of common

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environmental exposure), the most effective remediation measure would be to prevent human exposure to that environment and let HAV decay through natural processes, such as ultraviolet (UV) sunlight, which is typically a day or less of full sunlight exposure.

Based on your current public health knowledge, experience and expertise, please let us know if there is anything that would warrant a change in the above guidance that CDC has already provided, whereby you would now recommend the testing of waterways in order to combat the current San Diego region HAV outbreak.

In closing, please know that vaccination of the outbreak at-risk populations has been and will remain the top priority of the response to the San Diego region HAV outbreak. This response priority is followed by sanitation and hygiene activities (e.g., proper hand hygiene, access to restrooms, sanitation at encampments). To combat the local HAV outbreak, strategic approaches will continue to focus on vaccination, sanitation, and education.

Thank you in advance for your continued support.

Sincerely,


WILMA J. WOOTEN, M.D., M.P.H.
Public Health Officer
Director, Public Health Services

cc: Karen Smith, M.D., M.P.H.
Director and State Public Health Officer
California Department of Public Health