What is hepatitis D?

Hepatitis D is a liver infection caused by the hepatitis D virus virion. Hepatitis D only occurs among people who are infected with the Hepatitis B virus. Hepatitis D can cause an infection at the same time as the initial hepatitis B infection (co-infection), or it can infect a person with existing, lifelong (chronic) hepatitis B infection. Hepatitis D can lead to chronic infection and can cause serious liver damage (cirrhosis) and death. Hepatitis D is not common in North Dakota or in the United States. Areas where hepatitis D infections are more common include Eastern Europe, South America, Africa, Central Asia and the Middle East.

Who is at risk for hepatitis D?

Only individuals infected with hepatitis B can get hepatitis D. Those at greater risk for hepatitis B and hepatitis D infections include:
- Injection drug users
- Men who have sex with men
- Sex contacts of infected people
- Hemodialysis patients
- Health-care and public safety workers who have contact with infected blood
- Infants born to infected mothers

What are the symptoms of hepatitis D?

Symptoms of hepatitis D are the same as those of hepatitis B and may include tiredness, loss of appetite, nausea, abdominal discomfort, vomiting, joint pain, dark urine or jaundice (i.e., yellowing of skin or whites of eyes). Hepatitis D infection can cause a more severe or rapid progressive disease in people with chronic hepatitis B. Those with co-infection are more likely to result in fulminant hepatitis or severe liver failure compared to those only infected with the hepatitis B virus.

How soon do symptoms appear?

For hepatitis D coinfection, symptoms may appear 45 to 160 days after exposure, but symptoms usually appear within 90 days. For hepatitis D superinfection, symptoms may appear two to eight weeks after exposure.

How is hepatitis D spread?

Hepatitis D virus can acquired from blood or blood products, through injection drug use, or by sexual contact, but only if hepatitis B virus is present. Transmission from mother to newborn infant is uncommon.

When and for how long is a person able to spread the disease?

The virus can be found in blood and other body fluids before symptoms appear and may persist for several months afterward. People who become long-term carriers of the virus may remain contagious for their lifetime.
How is a person diagnosed?

A healthcare provider can make a diagnosis using several blood tests.

What is the treatment?

Hepatitis D infections can be difficult to treat but there is medication available to treat hepatitis D. Infected individuals should contact their healthcare provider to see if treatment is needed.

Does past infection make a person immune?

Yes. However, the person is still at risk for other hepatitis infections, such as hepatitis A and hepatitis C.

Should children or others be excluded from child care, school, work or other activities if they have hepatitis D?

A child with known hepatitis D should be excluded if he or she exhibits any of the following:

- Weeping sores that cannot be covered
- Biting or scratching behavior
- A bleeding problem
- Generalized dermatitis that may produce wounds or weepy tissue fluids
- Unable to participate in routine activities, needs more care than can be provided by staff, or meets other exclusion criteria, such as fever with behavioral change

The child can be readmitted to a group setting when skin sores are dry or covered, when the child is cleared to return by a health professional, or when the child is able to participate in activities.

What can be done to prevent the spread of hepatitis D?

Because hepatitis D cannot be transmitted in the absence of hepatitis B infection, hepatitis B vaccination protects against hepatitis D infection. A vaccine to prevent hepatitis B has been available for several years. It is safe and effective and is recommended for infants, children and adolescents. Adults at increased risk of hepatitis B infection who have not already been infected also should be immunized. People with chronic hepatitis B infection should take extreme care to avoid exposure to hepatitis D by reducing risk behaviors (not sharing toothbrushes, razors, needles or any other objects that may have become contaminated with blood). In addition, infected people must not donate blood and should inform their health-care providers so that proper health care can be provided.

Additional Information:

Additional information is available at [www.ndhealth.gov/disease](http://www.ndhealth.gov/disease) or by calling the North Dakota Department of Health at 800.472.2180. This disease is a reportable condition. As mandated by North Dakota law, any incidence of this disease shall be reported to the North Dakota Department of Health.

Resources: