

Montana Health Alert Network

DPHHS HAN

ADVISORY

Cover Sheet

DATE

April 25, 2022

SUBJECT

Recommendations for Adenovirus Testing and Reporting of Children with Acute Hepatitis of Unknown Etiology

INSTRUCTIONS

DISTRIBUTE to your local HAN contacts. This HAN is intended for general sharing of information.

- Time for Forwarding: **As Soon As Possible**
- Please forward to DPHHS at hhshan@mt.gov
- **Remove this cover sheet before redistributing and replace it with your own**



For LOCAL HEALTH DEPARTMENT reference only
DPHHS Subject Matter Resource for more information regarding this HAN, contact:

DPHHS CDCP

Epidemiology Section
1-406-444-0273

Immunization Section
1-406-444-5580

For technical issues related to the HAN message contact the Emergency Preparedness Section at 1-406-444-0919

DPHHS HAN Website:
www.han.mt.gov

REMOVE THIS COVER SHEET BEFORE REDISTRIBUTING AND REPLACE IT WITH YOUR OWN

Please ensure that DPHHS is included on your HAN distribution list.
hhshan@mt.gov

Categories of Health Alert Messages:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for a specific incident or situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action.

Information Service: passes along low level priority messages that do not fit other HAN categories and are for informational purposes only.

Please update your HAN contact information on the Montana Public Health Directory

DPHHS HAN

Information Sheet



DATE

April 25, 2022

SUBJECT

Recommendations for Adenovirus Testing and Reporting of Children with Acute Hepatitis of Unknown Etiology

BACKGROUND

A cluster of children with acute hepatitis and adenovirus infection in Alabama have been identified. No patients matching this clinical picture in Montana have been reported to DPHHS at this time. Healthcare providers in MT who have treated a pediatric patient that meets the clinical criteria described below since October 2021 are requested to report the suspected case to your [local health department](#).

<https://dphhs.mt.gov/publichealth/FCSS/countytribalhealthdepts>

Local health departments should notify the CDEpi section at DPHHS of suspect cases by calling 406-444-0273. Adenovirus testing should be considered for pediatric patients with hepatitis of unknown etiology. NAAT testing is preferred, and can be done on respiratory specimens, stool or rectal swabs, or blood.

INFORMATION

See CDCHAN-00462

RECOMMENDATIONS

See CDCHAN-00462

This is an official
CDC HEALTH ADVISORY

Distributed via the CDC Health Alert Network
April 21, 2022, 11:00 AM ET
CDCHAN-00462

Recommendations for Adenovirus Testing and Reporting of Children with Acute Hepatitis of Unknown Etiology

Summary

The Centers for Disease Control and Prevention (CDC) is issuing this Health Alert Network (HAN) Health Advisory to notify clinicians and public health authorities of a cluster of children identified with hepatitis and adenovirus infection. In November 2021, clinicians at a large children's hospital in Alabama notified CDC of five pediatric patients with significant liver injury, including three with acute liver failure, who also tested positive for adenovirus. All children were previously healthy. None had COVID-19. Case-finding efforts at this hospital identified four additional pediatric patients with hepatitis and adenovirus infection for a total of nine patients admitted from October 2021 through February 2022; all five that were sequenced had adenovirus type 41 infection identified. In two patients, plasma samples were negative for adenovirus by quantitative polymerase chain reaction (qPCR), but both patients were positive when retested using whole blood. Two patients required liver transplant; no patients died. A possible association between pediatric hepatitis and adenovirus infection is currently under investigation. Cases of pediatric hepatitis in children who tested negative for hepatitis viruses A, B, C, D, and E were reported earlier this month in the United Kingdom, including some with adenovirus infection [1].

This Health Advisory serves to notify US clinicians who may encounter pediatric patients with hepatitis of unknown etiology to consider adenovirus testing and to elicit reporting of such cases to state public health authorities and to CDC. Nucleic acid amplification testing (NAAT, e.g. PCR) is preferred for adenovirus detection and may be performed on respiratory specimens, stool or rectal swabs, or blood.

Background

Hepatitis is inflammation of the liver that can be caused by viral infections, alcohol use, toxins, medications, and certain other medical conditions. In the United States, the most common causes of viral hepatitis are hepatitis A, hepatitis B, and hepatitis C viruses [2]. Signs and symptoms of hepatitis include fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, dark urine, light-colored stools, joint pain, and jaundice [2]. Treatment of hepatitis depends on the underlying etiology.

Adenoviruses are double-stranded DNA viruses that spread by close personal contact, respiratory droplets, and fomites [3]. There are more than 50 types of immunologically distinct adenoviruses that can cause infections in humans. Adenoviruses most commonly cause respiratory illness but depending on the adenovirus type they can cause other illnesses such as gastroenteritis, conjunctivitis, cystitis, and, less commonly, neurological disease [3]. There is no specific treatment for adenovirus infections.

Adenovirus type 41 commonly causes pediatric acute gastroenteritis, which typically presents as diarrhea, vomiting, and fever; it can often be accompanied by respiratory symptoms [4]. While there have been case reports of hepatitis in immunocompromised children with adenovirus type 41 infection, adenovirus type 41 is not known to be a cause of hepatitis in otherwise healthy children [5, 6].

Recommendations

1. Clinicians should consider adenovirus testing in pediatric patients with hepatitis of unknown etiology. NAAT (e.g. PCR) is preferable and may be done on respiratory specimens, stool or rectal swabs, or blood.

2. Anecdotal reports suggest that testing whole blood by PCR may be more sensitive than testing plasma by PCR; therefore, testing of whole blood could be considered in those without an etiology who tested negative for adenovirus in plasma samples.

Request for Notification of Possible Cases

CDC is requesting notification from clinicians or state public health authorities of children <10 years of age with elevated aspartate aminotransferase (AST) or alanine aminotransferase (ALT) (>500 U/L) who have an unknown etiology for their hepatitis (with or without any adenovirus testing results, independent of the results) since October 1, 2021.

Please email CDC at ncirddvdgast@cdc.gov to notify of any cases meeting the above criteria or with any related questions.

If patients are still under medical care or have residual specimens available, please save and freeze them for possible additional testing and contact CDC at ncirddvdgast@cdc.gov for additional instructions.

For More Information

[Division of Viral Hepatitis | CDC](#)

[Adenovirus | CDC](#)

References

- [1] World Health Organization. Acute hepatitis of unknown aetiology - the United Kingdom of Great Britain and Northern Ireland. Disease Outbreak News [Internet]. 2022 Apr 15; Available from: <https://www.who.int/emergencies/disease-outbreak-news/item/acute-hepatitis-of-unknown-aetiology---the-united-kingdom-of-great-britain-and-northern-ireland>
- [2] Hepatitis Webpage. Centers for Disease Control and Prevention. Available from: <https://www.cdc.gov/hepatitis/abc/index.htm>
- [3] Adenoviruses Webpage. Centers for Disease Control and Prevention. Available from: <http://www.cdc.gov/adenovirus/index.html>
- [4] Kang G. Viral Diarrhea. International Encyclopedia of Public Health [Internet]. Elsevier; 2017. P. 260-7. Available from <https://www.sciencedirect.com/referencework/9780128037089/international-encyclopedia-of-public-health>
- [5] Munoz FM, Piedra PA, Demmler GJ. Disseminated Adenovirus Disease in Immunocompromised and Immunocompetent Children. CLIN INFECT DIS. 1998. Nov;27(5):1194-200. <https://doi.org/10.1086/514978>
- [6] Peled N, Nakar C, Huberman H, Scherf E, Samra Z, Finkelstein Y, et al. Adenovirus Infection in Hospitalized Immunocompetent Children. Clin Pediatr (Phila). 2004 Apr;43(3):223–9. <https://doi.org/10.1177/000992280404300303>

The Centers for Disease Control and Prevention (CDC) protects people's health and safety by preventing and controlling diseases and injuries; enhances health decisions by providing credible information on critical health issues; and promotes healthy living through strong partnerships with local, national, and international organizations.

Categories of Health Alert Network messages:

- | | |
|-------------------------|---|
| Health Alert | Requires immediate action or attention; highest level of importance |
| Health Advisory | May not require immediate action; provides important information for a specific incident or situation |
| Health Update | Unlikely to require immediate action; provides updated information regarding an incident or situation |
| HAN Info Service | Does not require immediate action; provides general public health information |

##This message was distributed to state and local health officers, state and local epidemiologists, state and local laboratory directors, public information officers, HAN coordinators, and clinician organizations##

This is an official
CDC HEALTH ADVISORY

Distributed via the CDC Health Alert Network
April 21, 2022, 11:00 AM ET
CDCHAN-00462

Recommendations for Adenovirus Testing and Reporting of Children with Acute Hepatitis of Unknown Etiology

Summary

The Centers for Disease Control and Prevention (CDC) is issuing this Health Alert Network (HAN) Health Advisory to notify clinicians and public health authorities of a cluster of children identified with hepatitis and adenovirus infection. In November 2021, clinicians at a large children's hospital in Alabama notified CDC of five pediatric patients with significant liver injury, including three with acute liver failure, who also tested positive for adenovirus. All children were previously healthy. None had COVID-19. Case-finding efforts at this hospital identified four additional pediatric patients with hepatitis and adenovirus infection for a total of nine patients admitted from October 2021 through February 2022; all five that were sequenced had adenovirus type 41 infection identified. In two patients, plasma samples were negative for adenovirus by quantitative polymerase chain reaction (qPCR), but both patients were positive when retested using whole blood. Two patients required liver transplant; no patients died. A possible association between pediatric hepatitis and adenovirus infection is currently under investigation. Cases of pediatric hepatitis in children who tested negative for hepatitis viruses A, B, C, D, and E were reported earlier this month in the United Kingdom, including some with adenovirus infection [1].

This Health Advisory serves to notify US clinicians who may encounter pediatric patients with hepatitis of unknown etiology to consider adenovirus testing and to elicit reporting of such cases to state public health authorities and to CDC. Nucleic acid amplification testing (NAAT, e.g. PCR) is preferred for adenovirus detection and may be performed on respiratory specimens, stool or rectal swabs, or blood.

Background

Hepatitis is inflammation of the liver that can be caused by viral infections, alcohol use, toxins, medications, and certain other medical conditions. In the United States, the most common causes of viral hepatitis are hepatitis A, hepatitis B, and hepatitis C viruses [2]. Signs and symptoms of hepatitis include fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, dark urine, light-colored stools, joint pain, and jaundice [2]. Treatment of hepatitis depends on the underlying etiology.

Adenoviruses are double-stranded DNA viruses that spread by close personal contact, respiratory droplets, and fomites [3]. There are more than 50 types of immunologically distinct adenoviruses that can cause infections in humans. Adenoviruses most commonly cause respiratory illness but depending on the adenovirus type they can cause other illnesses such as gastroenteritis, conjunctivitis, cystitis, and, less commonly, neurological disease [3]. There is no specific treatment for adenovirus infections.

Adenovirus type 41 commonly causes pediatric acute gastroenteritis, which typically presents as diarrhea, vomiting, and fever; it can often be accompanied by respiratory symptoms [4]. While there have been case reports of hepatitis in immunocompromised children with adenovirus type 41 infection, adenovirus type 41 is not known to be a cause of hepatitis in otherwise healthy children [5, 6].

Recommendations

1. Clinicians should consider adenovirus testing in pediatric patients with hepatitis of unknown etiology. NAAT (e.g. PCR) is preferable and may be done on respiratory specimens, stool or rectal swabs, or blood.

2. Anecdotal reports suggest that testing whole blood by PCR may be more sensitive than testing plasma by PCR; therefore, testing of whole blood could be considered in those without an etiology who tested negative for adenovirus in plasma samples.

Request for Notification of Possible Cases

CDC is requesting notification from clinicians or state public health authorities of children <10 years of age with elevated aspartate aminotransferase (AST) or alanine aminotransferase (ALT) (>500 U/L) who have an unknown etiology for their hepatitis (with or without any adenovirus testing results, independent of the results) since October 1, 2021.

Please email CDC at ncirddvdgast@cdc.gov to notify of any cases meeting the above criteria or with any related questions.

If patients are still under medical care or have residual specimens available, please save and freeze them for possible additional testing and contact CDC at ncirddvdgast@cdc.gov for additional instructions.

For More Information

[Division of Viral Hepatitis | CDC](#)

[Adenovirus | CDC](#)

References

- [1] World Health Organization. Acute hepatitis of unknown aetiology - the United Kingdom of Great Britain and Northern Ireland. Disease Outbreak News [Internet]. 2022 Apr 15; Available from: <https://www.who.int/emergencies/disease-outbreak-news/item/acute-hepatitis-of-unknown-aetiology---the-united-kingdom-of-great-britain-and-northern-ireland>
- [2] Hepatitis Webpage. Centers for Disease Control and Prevention. Available from: <https://www.cdc.gov/hepatitis/abc/index.htm>
- [3] Adenoviruses Webpage. Centers for Disease Control and Prevention. Available from: <http://www.cdc.gov/adenovirus/index.html>
- [4] Kang G. Viral Diarrhea. International Encyclopedia of Public Health [Internet]. Elsevier; 2017. P. 260-7. Available from <https://www.sciencedirect.com/referencework/9780128037089/international-encyclopedia-of-public-health>
- [5] Munoz FM, Piedra PA, Demmler GJ. Disseminated Adenovirus Disease in Immunocompromised and Immunocompetent Children. CLIN INFECT DIS. 1998. Nov;27(5):1194-200. <https://doi.org/10.1086/514978>
- [6] Peled N, Nakar C, Huberman H, Scherf E, Samra Z, Finkelstein Y, et al. Adenovirus Infection in Hospitalized Immunocompetent Children. Clin Pediatr (Phila). 2004 Apr;43(3):223–9. <https://doi.org/10.1177/000992280404300303>

The Centers for Disease Control and Prevention (CDC) protects people's health and safety by preventing and controlling diseases and injuries; enhances health decisions by providing credible information on critical health issues; and promotes healthy living through strong partnerships with local, national, and international organizations.

Categories of Health Alert Network messages:

- | | |
|-------------------------|---|
| Health Alert | Requires immediate action or attention; highest level of importance |
| Health Advisory | May not require immediate action; provides important information for a specific incident or situation |
| Health Update | Unlikely to require immediate action; provides updated information regarding an incident or situation |
| HAN Info Service | Does not require immediate action; provides general public health information |

##This message was distributed to state and local health officers, state and local epidemiologists, state and local laboratory directors, public information officers, HAN coordinators, and clinician organizations##