# 肝炎疫苗注射



## ╅りのおり

甲型肝炎疫苗的主要成份是已失去活性的甲 型肝炎病毒,疫苗經注射進入人體後會刺激抗體 的產生而形成對甲型肝炎病毒的免疫力。甲型肝 炎疫苗注射計劃共包括兩次注射,第二次疫苗注 射诵常在第一次注射後的六至十八個月內進行; 在接受第一次疫苗注射之後,人體通常需要一個 月時間才能產生足以抵禦甲型肝炎病毒的抗體。 ,尚未有甲型肝炎疫苗適用於一歲以下兒

現時,並沒有疫苗可以預防戊型肝炎。

### 免疫球蛋白注射

注射甲型肝炎免疫球蛋白的人士,會得到為期 三至五個月的免疫保障。那些要在

短時間內出發到甲型肝炎流行 地區作短暫停留的人士,可以 考慮接受此類注射。如果未來 將會經常到甲型肝炎病毒傳播 廣泛的地區旅遊,可考慮盡早 接種甲型肝炎疫苗。

戊型肝炎免疫球蛋白仍在試驗 中。

### 醫治途徑

任何人士,如懷疑自己染上甲型或戊型肝炎, 應立即到私家或政府診所進行身體檢查,再作診 治,切忌私下亂服成藥,引來無窮後患。

網址: http://www.hepatitis.gov.hk



衞生署 特別預防計劃 病毒性肝炎預防服務

## Beware of food hygiene Prevent Hepatitis A and E

# 飲食衞生要精明







衞生署 特別預防計劃 病毒性肝炎預防服務 Viral Hepatitis Preventive Service, Special Preventive Programme, Department of Health

### 🛨 甲、戊型肝炎

肝炎即是肝臟細胞發炎。肝炎的成因有很多 由過濾性病毒引致的肝炎在本港較常見。其他成 因包括酒精、藥物、化學劑和遺傳病等。

甲型和戊型肝炎均是由病毒引 起的傳染病。主要經由腸道傳 染,病毒由病人的大便中排出 再經由受病毒污染的食 物而傳播。其傳播途徑包括飲 用或進食受病毒污染而未經煮 熟的食水和食物,特別是蠔

除此之外,甲型肝炎亦可以經人與人接觸而傳 播。而戊型肝炎病毒,在人與人之間傳播並不常 見。

### 流行情況

在香港,甲型肝炎的傳播趨勢與已發展國家 相似。受感染人數在過去二十年間逐步下降,而 感染者的年龄則上升,在香港大部分三十歲以下 的青年都從未受感染。因此,一旦病毒流行的時 候, 感染人數便可能突然激增

近年香港戊型肝炎呈報個案有上升的趨勢, 並已成為衞生署接獲呈報的病毒性肝炎中最常見 的一種。每年呈報的戊型肝炎個案由2000年的 十一宗上升至2010年的一百一十八宗。

### 病徵及後果

一般患者會於染病後的二至六星期出現病徵 包括有輕微發熱、全身疲倦、肌肉痛、頭痛、食 、噁心嘔吐、上腹不適、腹瀉,黃疸(皮 膚及眼白發黃)及茶尿等等。

甲型肝炎病患者年紀愈輕,病徵愈輕微。差不 多所有在孩童時感染甲型肝炎的患者都沒有明顯 病徵,因而從未察覺到曾經受感染。

甲型肝炎患者一般會自己痊癒而產生抗體,令 患者終身免疫,不會成為長期帶病毒者。但亦有 極少數的甲型肝炎病例會發展成肝臟衰竭 死亡。

戊型肝炎和甲型肝炎一樣,感染後都不變成帶 病毒者或引致慢性肝病。其死亡率一般較低,通 常少於百份之一;但對妊娠第三期的孕婦來說: 死亡率可達百份之二十。

### ➡ 預防方法

現時並沒有治療甲型及戊型肝炎的有效藥物 因此預防便顯得格外重要。市民必須 保持良好的個人、食物及環境衞 牛。

#### 個人衞生

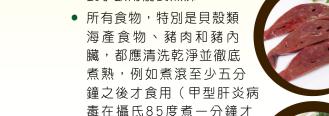
• 時常保持雙手清潔;預備 食物前、進食前及如廁後 都應使用肥皂及清水洗手

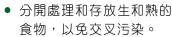
#### 飲食衞生

- 食水飲用前要煮沸
- 海產食物、豬肉和豬內 都應清洗乾淨並徹底 煮熟,例如煮滾至少五分 鐘之後才食用(甲型肝炎病 毒在攝氏85度煮一分鐘才 會死亡)
- 食物,以免交叉污染。

### 環境衞生

- 廚房飲食用具要保持清潔







• 妥善處理及儲存食水



### Hepatitis A and E

"Hepatitis" means inflammation of the liver cells. There are many causes of hepatitis of which viral infection is more commonly seen in Hong Kong. Other causes include alcohol, drugs, chemicals and genetic diseases.

Hepatitis A and E are liver diseases caused by the Hepatitis A and E viruses. In general they are transmitted through feco-oral route. Food contaminated with the virus is the most common vehicle transmitting hepatitis. The Hepatitis A and

E viruses can be transmitted by drinking contaminated water and eating contaminated food without proper cooking, especially pork and pig offal, bivalve shellfish like oysters, clams, scallops and mussels, etc.



Hepatitis A may be caused by close personal contact with infected person. Person-to-person transmission of Hepatitis E appears to be less efficient than hepatitis A virus.

### **Epidemiology**

In Hong Kong, the current situation resembles that of many developed countries. In the last 20 years, Hong Kong has experienced a steady fall in the incidence of hepatitis A. Most people in Hong Kong below the age of 30 have never been exposed, and are therefore susceptible to the virus. This situation provides an opportunity for the virus to rapidly spread in the community.

Notification from acute Hepatitis E infection has been increasing in recent years and become the most common viral hepatitis reported to Department of Health. In 2010, 118 cases were reported to Department of Health, as compared with 11 cases in 2000.

#### Clinical features and prognosis

The hepatitis A virus has an incubation period of 2 to 6 weeks. Symptoms and signs include mild fever, fatique, muscle pains, headache, loss of appetite, nausea, vomiting, upper abdominal discomfort, diarrhea, jaundice (yellowing of skin and the whites of eyes) and tea-colored urine.

The younger the patient, the less severe are the symptoms. In fact most people who contracted hepatitis A in childhood do not even recall being sick.

Patients with Hepatitis A usually recover by themselves and become immune to it for life. There is no chronic carrier state but in a few cases, may develop into liver failure that can lead to death.

Hepatitis E is similar to Hepatitis A- chronic infection does not occur. The case mortality rate is generally low at less than 1%. It may reach 20% among pregnant women in the third trimester.



### **Prevention**

There is no specific treatment for Hepatitis A and Hepatitis E. The most effective ways to combat Hepatitis A and E are to maintain good personal, food and environmental hygiene

#### **Personal hygiene**

• Wash hands with soap before preparing or eating food and after going to the toilet

### Food hygiene

- Drink only boiled water
- All food, especially seafood (e.g. shellfish), pork and pig offal should be careful cleaned and thoroughly cooked. They should be cooked at boiling temperature for not less than 5 minutes before eating. (The hepatitis A virus is killed by heating to 85 degree Celsius for 1 minute).
- Handle and store raw and cooked food separately to prevent cross-contamination.

### **Environmental hygiene**

- sewage has to be properly disposed
- store drinking water properly
- keep all the kitchen utensils clean



### **Immunization**

### **Hepatitis A vaccine**

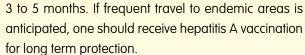
The hepatitis A vaccine is essentially an inactivated form of the virus. Being vaccinated against hepatitis A helps produce antibodies to the virus. A complete course of vaccination requires 2 injections, given 6 months to 18 months apart. The body takes 4 weeks to develop antibody against hepatitis A after the first vaccine injection. Hepatitis A vaccine is not licensed for children younger than one year of age.

At present, no vaccine is available for the prevention of hepatitis E.



### Immune Globulin

Travelers may consider Hepatitis A immune globulin injection if they travel to endemic areas and need to depart at short notice. Injection of immune globulin confers temporary protection of



Hepatitis E Immune Globulin is not yet available.

### Management

Anyone who suspected to contract Hepatitis A or Hepatitis E should consult their family doctor for advice. Do not take over-the counter medicine.

### Website: http://www.hepatitis.gov.hk

Revised in November 2012 by Viral Hepatitis Preventive Service,

Special Preventive Programme, Department of Health







