

# LiverWELL<sup>TM</sup>

## A GUIDE TO VIRAL HEPATITIS FOR STAFF WORKING IN PRISONS

- ✓ INCREASE YOUR HEALTH KNOWLEDGE
- ✓ KNOW THE WORKPLACE SAFETY CHECKLIST
- ✓ SAFEGUARD YOU AND YOUR FAMILY'S HEALTH
- ✓ PROTECT YOUR COLLEAGUES AND PROTECT THE PRISON POPULATION

### HEPATITIS INFOLINE

**OUTSIDE** 1800 703 003

**INSIDE** \*#09

**Hepatitis Infoline:** You can contact the Hepatitis Infoline with questions, to request resources, or be connected to a local health service on 1800 703 003. Prisoners can dial \*#09 from the prison phone to be connected to the same service. They can ask questions, request resources, and book in to see one of the Statewide Hepatitis Program nurses.

**HEPATITISVICTORIA**



# OVERVIEW

## WHY DO WE TALK ABOUT VIRAL HEPATITIS SO MUCH IN PRISONS?

Your health and safety working in prisons is extremely important, not only to management, but also to your family and the wider community. Justice Health, the Department of Justice and Community Safety, has provided funding for the creation of this resource to increase your knowledge and capacity around viral hepatitis. This resource has been made specifically for Victorian prison workers.

The Workforce Development Supervisors supported the development of this resource by facilitating staff surveys to ensure the most relevant information was included in this guide. This insight was invaluable and thank you to all the staff who took part.

The Victorian government has set bold targets to increase testing and treatment of those affected by viral hepatitis, and to reduce the stigma and discrimination that surrounds it. Being informed will both protect you, and enable you to support your colleagues, prisoners, and others in your community.

Viral hepatitis is a health issue with much higher rates in prison than in the community. A person in prison is more than 20 times as likely to have hepatitis C, than someone outside of prison. Prisoners also experience higher rates of hepatitis A and B.

In the Victorian community in 2018, an estimated 48,000 people had hepatitis C, whilst 57,000 people had hepatitis B.



HERE'S WHAT WE'LL COVER

- WHAT IS HEPATITIS?
- HEPATITIS A
- HEPATITIS B
- HEPATITIS C
- VACCINES
- LIVER HEALTH TIPS
- BLEACH IN PRISONS
- WHAT'S YOUR TRANSMISSION RISK?
- WORKPLACE SAFETY CHECKLIST
- STATEWIDE HEPATITIS PROGRAM

# WHAT DOES THE LIVER DO?

The liver is responsible for over 500 functions in the body. It is part of the digestive system and processes food and nutrients, extracting vitamins and storing these, and releasing them as your body needs them. It filters toxins and wastes, separating them out so they can be removed. It also regulates hormones.

## WHAT IS HEPATITIS?

Hepatitis literally means 'inflammation of the liver.' There are several causes of hepatitis: alcohol, fatty liver, auto-immune issues, and viral infection. Hepatitis inflames and damages the liver over time, affecting its ability to do its job.

## WHAT IS VIRAL HEPATITIS?

The term 'viral hepatitis' means hepatitis which is caused by a virus. There are several different strains of the hepatitis virus – Hepatitis A, B, C, D and E. This guide will provide information about the more common forms of viral hepatitis: A, B and C. It will explain the different ways that transmission can occur, and the treatment options if you, a colleague, or prisoner are exposed.

Hepatitis A, B and C can all be ACUTE infections. Hepatitis B and C can progress from ACUTE to CHRONIC, which means the virus can settle in to stay.

The longer the virus stays in your system, the more damage it can do. The hepatitis virus travels to your liver and multiplies, causing your immune system to attack it. As the immune system attacks the virus it begins to damage your liver, causing scarring.

Early scarring is called FIBROSIS. It is usually reversible with intervention and a healthy lifestyle.

Advanced scarring is called CIRRHOISIS and can often be improved, but not always.

Viral hepatitis is the leading cause of liver cancer in Australia. LIVER CANCER and LIVER FAILURE are very serious and can both lead to death.

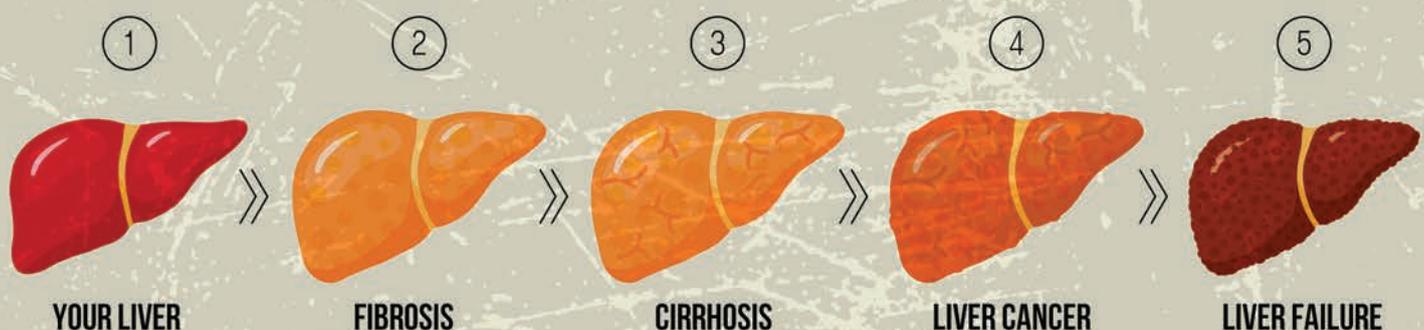
There have been less than 30 cases of hepatitis D or E in Australia annually over the last 6 years and are very low risk, however more information about these can be found on the Hepatitis Victoria website: [www.hepvic.org.au](http://www.hepvic.org.au).

An **ACUTE** infection, means there is a short term and intensified viral load in the system.

A **CHRONIC** infection means the virus has settled in to stay.

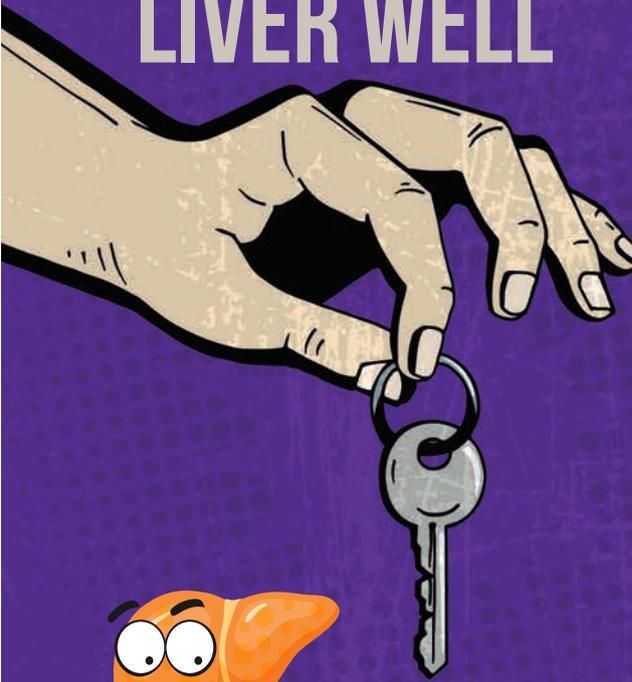
Factors which increase the rate of progression

- Co-infection: HIV, hep B/C
- Diet/weight
- Gender/ Genes
- Alcohol
- Viral load - the amount of hepatitis virus in the blood
- Stress



**PROGRESSION MAY TAKE 20-30 YEARS**

# FIVE KEYS TO KEEPING YOU LIVER WELL



## HEPATITIS A

TO LOOK AFTER YOUR LIVER, THERE ARE FIVE SIMPLE RULES:



**EXERCISE REGULARLY**



**MANAGE STRESS**



**EAT WELL**



**STAY HYDRATED**

**TRY TO DRINK 2 LITRES OF WATER A DAY**



**LIMIT ALCOHOL CONSUMPTION**

If your GP has told you that your liver is damaged, follow the advice above, and remember you are more susceptible to damage from drinking alcohol or ingesting toxins, including some prescription and over the counter medicine, such as paracetamol.

Download the **LiverWELL™** app for Android and iPhone

Hepatitis A is an ACUTE infection which means there is usually a rapid onset, a relatively brief period of symptoms, and resolution within days or weeks. Hepatitis A is transferred via the faecal-oral route. This means traces of an infected person's faecal matter (poo) are ingested through the mouth of someone else, sometimes through contaminated water or food.

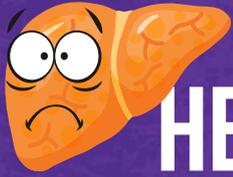
Young children often have no symptoms, but for older children and adults, symptoms include fever, nausea, abdominal discomfort, dark urine and yellow skin and eyes (jaundice).

If you get hepatitis A you need to rest, eat smaller meals to reduce nausea, and take care of your liver by following the five keys to keep your liver well. Hepatitis A infection usually lasts less than 12 weeks. Treatment is focused on reducing symptoms. If you get hepatitis A and you already have a seriously damaged liver, the additional strain can lead to liver failure.

Hepatitis A is not very common in Australia, and many Australians hear of it for the first time when planning to travel overseas to a country of high prevalence. A vaccine is often recommended to travelers.

The vaccine is an effective way to protect yourself from getting hepatitis A. If you catch hepatitis A, you will be immune from catching it in the future.

The vaccine usually consists of two injections over a 6-month period.



# HEPATITIS B

Hepatitis B can be both an ACUTE or CHRONIC illness.

Hepatitis B is a common, long-term illness that carries serious health risks. It can be spread from blood to blood, by sexual fluids or from mother to baby. 3.6% of people entering Australian prisons tested positive for hepatitis B which is three times higher than average.

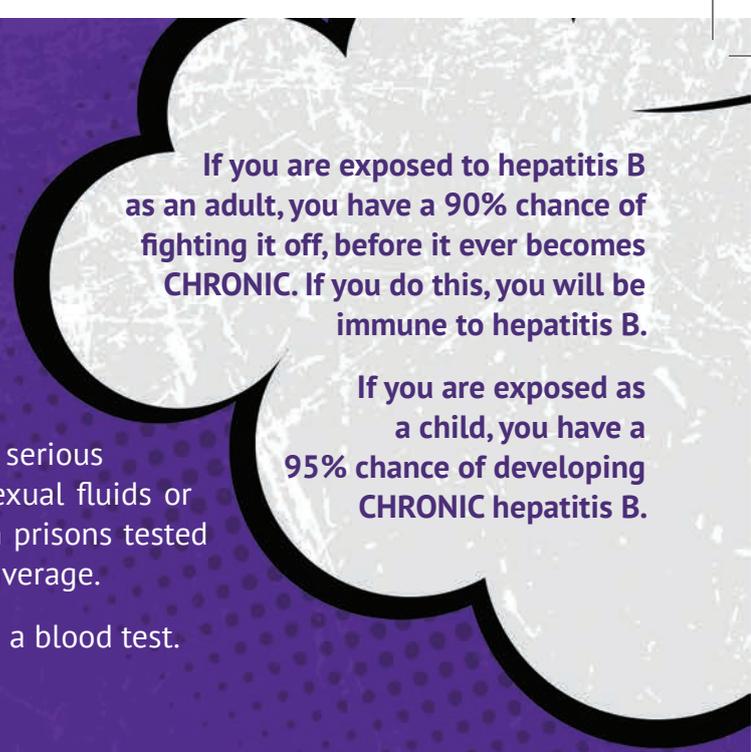
The only way to know if you have hepatitis B, is by having a blood test.

## HAVING A BLOOD TEST FOR HEPATITIS B WILL SHOW:

- If you are vaccinated for hepatitis B
- If you have been exposed and fought off the infection, leaving you immune
- If you have active hepatitis B, or
- If you have never been exposed or vaccinated

Most people have no symptoms until it's too late and their liver is seriously damaged, leading to cirrhosis, liver failure or liver cancer.

You can stop the damage in its tracks. There is no cure for CHRONIC hepatitis B, but liver damage can be slowed down or stopped with medication and by keeping your liver well. Talk to your GP for further advice.



If you are exposed to hepatitis B as an adult, you have a 90% chance of fighting it off, before it ever becomes CHRONIC. If you do this, you will be immune to hepatitis B.

If you are exposed as a child, you have a 95% chance of developing CHRONIC hepatitis B.

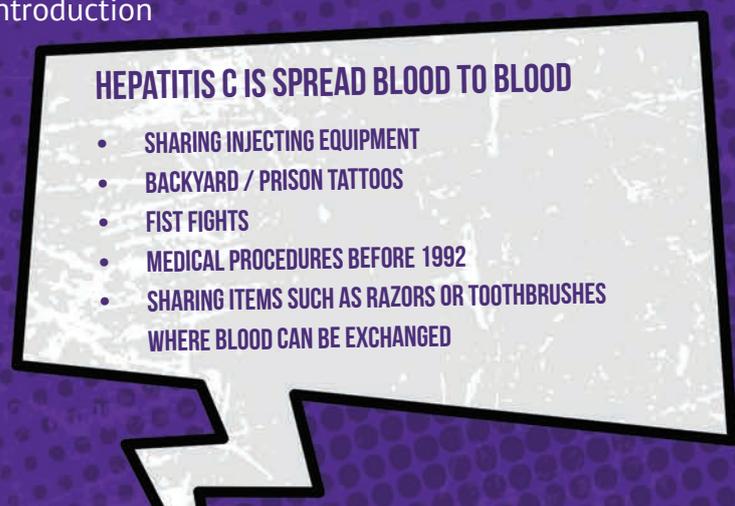


# HEPATITIS C

Hepatitis C is the most typical form of viral hepatitis we talk about in prisons. There are very high rates of hepatitis C inside, being nearly 20 times more common than on the outside.

Hepatitis C can be both an ACUTE or CHRONIC illness. There are several different strains (genotypes) of viral hepatitis – and you can catch more than one strain at the same time, which increases the speed of liver damage. Twenty-five per cent of people will clear hepatitis C naturally, but for those who don't, the infection becomes chronic.

Treatment for hepatitis C has improved a lot since the introduction of new direct-acting antivirals, DAAs, in 2016. Read more on the next page.



## HEPATITIS C IS SPREAD BLOOD TO BLOOD

- SHARING INJECTING EQUIPMENT
- BACKYARD / PRISON TATTOOS
- FIST FIGHTS
- MEDICAL PROCEDURES BEFORE 1992
- SHARING ITEMS SUCH AS RAZORS OR TOOTHBRUSHES WHERE BLOOD CAN BE EXCHANGED

# VACCINES



## Hepatitis B vaccine:

There is an effective vaccine to protect you and your children from hepatitis B. Since the year 2000, the vaccine for hepatitis B has been offered to all new-born babies across Australia. The vaccine is usually three injections over six months. Some high-risk groups can access the vaccine for free, including prisoners.



Hepatitis A vaccine: involves two injections over 6 months. In 2018 the Victorian government introduced a free, two dose hepatitis A vaccination program for all Victorian men who have sex with men, and people who have injected drugs in the past 12 months, homeless rough sleepers and adult prisoners.

Eligible people are able to get access to the free, two dose course of hepatitis A vaccine until 30 June 2019.

To find out the latest eligibility email [immunisation@dhhs.vic.gov.au](mailto:immunisation@dhhs.vic.gov.au)



If a prisoner is diagnosed with hepatitis C, they will be encouraged to access the hepatitis B vaccine to avoid co-infection. There is no vaccine for hepatitis c.

Harm reduction is the accepted health strategy to address the risks involved with injecting drug use. In the community, injecting drug users are encouraged to access Needle and Syringe Programs (NSPs). In prison, prisoners have access to packets of powdered bleach which turns pink in colour when mixed with water.

## TO GET THE CURE, YOU MUST FIRST BE ASSESSED.

A BLOOD TEST WILL SHOW IF YOU HAVE HEPATITIS C ANTIBODIES (ONCE YOU HAVE BEEN EXPOSED TO HEPATITIS C, YOU WILL ALWAYS HAVE THE ANTIBODIES)

IF YOU ARE ANTIBODY POSITIVE, A FURTHER TEST CALLED A PCR, WILL SHOW IF IT IS AN ACTIVE INFECTION, YOUR VIRAL LOAD, AND WHAT STRAIN/S YOU HAVE

YOUR LIVER WILL BE ASSESSED USING A FIBROSCAN. A FIBROSCAN IS A NON-INVASIVE PROCEDURE LIKE AN ULTRASOUND WHICH CAN HELP ASSESS THE HEALTH OF A LIVER, SUCH AS IF IT HAS SIGNIFICANT SCARRING.

YOU WILL BE PRESCRIBED MEDICATION – USUALLY TAKING A PILL DAILY FOR 8 – 12 WEEKS



## HEPATITIS C – TREATMENT FOR CURE

In the past, the treatment was only 40% effective across some strains of hepatitis C and involved some unpleasant side effects. Since 2016, there have been more effective treatments for hepatitis C. The treatments available today successfully cure hepatitis C at a rate of 95% with only minimal side effects such as slight nausea, fatigue or headaches.

The medication is listed on the Pharmaceutical Benefits Scheme (PBS) meaning it is subsidised by the Australian Government, and costs less than \$40 a month. The treatment is available to prisoners through the Statewide Hepatitis Assessment and Treatment Program.

There is no immunisation for hepatitis C. After you are cured, you can catch it again.

# WORKPLACE SAFETY CHECKLIST

- GET VACCINATED FOR HEPATITIS A AND B
- ENCOURAGE PEOPLE WITH HEPATITIS C TO GET TREATMENT (STAFF AND PRISONERS)
- USE PERSONAL PROTECTIVE EQUIPMENT (PPE) WHEN DEALING WITH BLOOD OR BODILY FLUIDS
- KEEP WOUNDS WELL COVERED
- BE CAUTIOUS DURING SEARCHES

IF YOU THINK YOU'VE BEEN EXPOSED, WASH THE SITE WITH WATER, INFORM YOUR SUPERVISOR AND SEEK MEDICAL ADVICE.



## STATEWIDE HEPATITIS ASSESSMENT AND TREATMENT PROGRAM

The Statewide Hepatitis Assessment and Treatment Program commenced in 2015 and is delivered by nurses from St Vincent's who travel to all Victorian prisons to manage viral hepatitis in the prison population. This way, if the prisoner is transferred their liver care program can be maintained.

Prisoners can be referred from medical, can make a self-referral, or they can call the Hepatitis Infoline and ask to be seen. Nurses arrange the prescription for treatment for hepatitis C and they also recommend fibroscans. Prisoners will need a valid Medicare number to receive the medication. If they do not know their Medicare details, the nurses can find out on their behalf.

If a prisoner is leaving prison soon and didn't get on treatment, the liver nurses will help link the prisoner to a GP in the community to get treatment. With their permission, they will send results and liver care plan to their nominated GP.

To get in touch you can call 92313788

# ARE YOU AT RISK?

THERE IS NO RISK OF TRANSFERRING HEPATITIS A, B OR C DURING THE FOLLOWING ACTIVITIES:

- CASUAL PHYSICAL CONTACT SUCH AS HUGGING, KISSING AND SHAKING HANDS
- COUGHING AND SNEEZING
- MOSQUITO BITES

THERE IS NO RISK OF SPREADING HEPATITIS B OR C BY USING THE SAME SHOWER, TOILET OR LAUNDRY, BUT GOOD HYGIENE SHOULD BE PRACTISED TO MANAGE HEPATITIS A OUTBREAKS.

EXPOSURE TYPE	HEPATITIS A	HEPATITIS B	HEPATITIS C
INCIDENTAL BLOOD CONTACT FIGHTS WHERE BLOOD ENTERS THE BROKEN SKIN BLOODY SALIVA WHEN GIVING MOUTH TO MOUTH WITH NO PROTECTIVE EQUIPMENT SPORTS INJURIES WHERE INVOLVING TRANSFER OF BLOOD		MODERATE	LOW
NEEDLESTICK OR PENETRATING SKIN INJURIES CUT BY A BLADE WHICH RECENTLY CUT ANOTHER BEING PIERCED BY USED INJECTING NEEDLE SHARING INJECTING NEEDLE		HIGH	HIGH
TATTOOING / BODY PIERCING SHARING TATTOOING NEEDLES, INK OR INK POTS UNSTERILE BODY PIERCING EQUIPMENT		HIGH	HIGH
SHARING PERSONAL HYGIENE PRODUCTS WHEN THERE IS A TRANSFER OF BLOOD TOOTHBRUSHES, RAZORS, TWEEZERS BARBERING EQUIPMENT		MODERATE	MODERATE
BLOODY SALIVA IN MOUTH OR EYES OR BITES THAT BREAK THE SKIN		VERY LOW	
BLOOD AND SALIVA TO UNBROKEN SKIN AND SKIN-TO-SKIN CONTACT			
SHARING SNORTING APPARATUS		LOW	LOW
SEXUAL EXPOSURE (NO CONDOM USED)	MODERATE	HIGH	VERY LOW
MOTHER TO BABY (UNVACCINATED BABY) PREGNANCY AND BIRTH		HIGH	
BREASTFEEDING (CRACKED NIPPLES/UNWASHED HANDS) BREASTFEEDING (UNCRAKED NIPPLES/WASHED HANDS)	LOW	MODERATE	LOW
EATING FOOD PREPARED BY SOMEONE WITH HEPATITIS WHO HAS NOT WASHED THEIR HANDS	HIGH		
DRINKING CONTAMINATED WATER CONTAMINATED WITH WATER CONTAMINATED WITH FAECAL MATTER WATER CONTAMINATED WITH BLOOD	HIGH		