

IDPH Issues Warning About Three Potential Cases of Severe Hepatitis in Children in Illinois

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SPRINGFIELD – The Illinois Department of Public Health (IDPH) announced today that it has learned of three suspected cases of severe hepatitis in children under ten years of age, potentially linked to a strain of adenovirus. Two of the cases are in suburban Chicago and one is in Western Illinois. One case resulted in a liver transplant. IDPH is working to learn of other suspected cases in Illinois and is asking healthcare providers in the state to be on the lookout for symptoms and to report any suspected cases of hepatitis in children of unknown origin to local public health authorities.

The IDPH announcement follows a nationwide alert issued by the CDC in response to a cluster of nine cases of hepatitis of unknown origin in children in Alabama ranging in age from 1 to 6 years old, all of whom were previously healthy.

The CDC said that symptoms of hepatitis, or inflammation of the liver, include fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, dark urine, light-colored stools, joint pain, and jaundice and can be caused by viruses. These cases appear to have an association with adenovirus 41. Adenoviruses spread from person-to-person and most commonly cause respiratory illness, but depending on the type, can also cause other illnesses such as gastroenteritis (inflammation of the stomach or intestines), conjunctivitis (pink eye), and cystitis (bladder infection). Adenovirus type 41 typically presents as diarrhea, vomiting and fever, and is often accompanied by respiratory symptoms. While there have been case reports of hepatitis in immunocompromised children with adenovirus infection, adenovirus type 41 is not known to be a cause of hepatitis in otherwise healthy children.

CDC said it is working with state health departments to see if there are additional U.S. cases, and what may be causing these cases. At this time, CDC said it believes adenovirus may be the cause for these reported cases, but investigators are still learning more – including ruling out other possible causes and identifying other possible contributing factors.

CDC is asking physicians to consider adenovirus testing using PCR or NAAT on respiratory samples, stool or rectal swabs and whole blood for pediatric patients with hepatitis of unknown etiology, and to report any possible cases of hepatitis of unknown origin to CDC and state public health authorities.

In addition, CDC is encouraging parents and caregivers to be aware of the symptoms of hepatitis, and to contact their healthcare provider with any concerns. CDC continues to recommend children be up to date on all their vaccinations, and that parents and caregivers of young children take the same everyday preventive actions that it recommends for everyone, including washing hands often, avoiding people who are sick, covering coughs and sneezes, and avoiding touching the eyes, nose or mouth.

For more information, go to: https://emergency.cdc.gov/han/2022/han00462.asp