# Hepatitis

#### Definition

Hepatitis is swelling and inflammation of the liver.

#### Causes

Hepatitis can be caused by:

- Immune cells in the body attacking the liver
- Infections from viruses (such as hepatitis A, hepatitis B, or hepatitis C), bacteria, or parasites
- Liver damage from alcohol or poison
- Medicines, such as an overdose of acetaminophen
- Fatty liver

Liver disease can also be caused by inherited disorders such as cystic fibrosis or hemochromatosis, a condition that involves having too much iron in your body.

Other causes include Wilson disease, a disorder in which the body retains too much copper.

## Symptoms

Hepatitis may start and get better quickly. It may also become a longterm condition. In some cases, hepatitis may lead to liver damage, liver failure, cirrhosis, or even liver cancer.

Risk factors for Hepatitis C include: Unprotected sex with infected partner Sharing contaminated needles Liver \*ADAM Right lobe of liver Left lobe of liver

\*ADAM.

There are several factors that can affect how severe the condition is. These may include the cause of the liver damage and any illnesses you have. Hepatitis A, for example, is most often short-term and does not lead to chronic liver problems.

The symptoms of hepatitis include:

- Pain or bloating in the belly area
- Dark urine and pale or clay-colored stools
- Fatigue
- Low grade fever
- Itching
- Jaundice (yellowing of the skin or eyes)
- · Loss of appetite
- Nausea and vomiting
- Weight loss

#### Hepatitis

You may not have symptoms when first infected with hepatitis B or C. You can still develop liver failure later. If you have any risk factors for either type of hepatitis, you should be tested often.

### Exams and Tests

You will have a physical exam to look for:

- Enlarged and tender liver
- Fluid in the abdomen (ascites)
- · Yellowing of the skin

You may have lab tests to diagnose and monitor your condition, including:

- Ultrasound of the abdomen
- Autoimmune blood markers
- Blood tests to diagnose Hepatitis A, B, or C
- Liver function tests
- Liver biopsy to check for liver damage (may be needed in some cases)
- Paracentesis (if fluid is in your abdomen)

#### Treatment

Your health care provider will talk to you about treatment options. Treatments will vary, depending on the cause of your liver disease. You may need to eat a high-calorie diet if you are losing weight.

### Support Groups

There are support groups for people with all types of hepatitis. These groups can help you learn about the latest treatments and how to cope with having the disease.

## **Outlook (Prognosis)**

The outlook for hepatitis will depend on what is causing the liver damage.

#### **Possible Complications**

Complications may include:

- Permanent liver damage, called cirrhosis
- Liver failure
- Liver cancer

#### When to Contact a Medical Professional

Seek care immediately if you:

- Have symptoms from too much acetaminophen or other medicines. You may need to have your stomach pumped
- Vomit blood
- Have bloody or tarry stools
- Are confused or delirious

Call your provider if:

- You have any symptoms of hepatitis or believe that you have been exposed to hepatitis A, B, or C.
- You cannot keep food down due to excessive vomiting. You may need to receive nutrition through a vein (intravenously).
- You feel sick and have travelled to Asia, Africa, South America, or Central America.

#### Prevention

Talk to your provider about having a vaccine to prevent hepatitis A and hepatitis B.

Steps for preventing the spread of hepatitis B and C from one person to another include:

- Avoid sharing personal items, such as razors or toothbrushes.
- DO NOT share drug needles or other drug equipment (such as straws for snorting drugs).
- Clean blood spills with a mixture of 1 part household bleach to 9 parts water.
- DO NOT get tattoos or body piercings with instruments that have not been cleaned properly.

To reduce your risk of spreading or catching hepatitis A:

- Always wash your hands well after using the restroom, and when you come in contact with an infected person's blood, stools, or other bodily fluid.
- Avoid unclean food and water.

#### References

Czaja AJ. Autoimmune hepatitis. In: Feldman M, Friedman LS, Brandt LJ, eds. *Sleisenger and Fordtran's Gastrointestinal and Liver Disease: Pathophysiology/Diagnosis/Management*. 10th ed. Philadelphia, PA: Elsevier Saunders; 2016:chap 90.

Pawlotsky J-M. Chronic viral and autoimmune hepatitis. In: Goldman L, Schafer AI, eds. *Goldman-Cecil Medicine*. 25th ed. Philadelphia, PA: Elsevier Saunders; 2016:chap 149.

Sjogren MH, Bassett JT. Hepatitis A. In: Feldman M, Friedman LS, Brandt LJ, eds. *Sleisenger and Fordtran's Gastrointestinal and Liver Disease: Pathophysiology/Diagnosis/Management*. 10th ed. Philadelphia, PA: Elsevier Saunders; 2016:chap 78.

Takyar V, Ghany MG. Hepatitis A, B, D, and E. In: Kellerman RD, Bope ET, eds. *Conn's Current Therapy 2018*. Philadelphia, PA: Elsevier Saunders; 2018:214-220.

Wedemeyer H. Hepatitis C. In: Feldman M, Friedman LS, Brandt LJ, eds. *Sleisenger and Fordtran's Gastrointestinal and Liver Disease: Pathophysiology/Diagnosis/Management*. 10th ed. Philadelphia, PA: Elsevier Saunders; 2016:chap 80.

Wells JT, Perrillo R. Hepatitis B. In: Feldman M, Friedman LS, Brandt LJ, eds. *Sleisenger and Fordtran's Gastrointestinal and Liver Disease: Pathophysiology/Diagnosis/Management*. 10th ed. Philadelphia, PA: Elsevier Saunders; 2016:chap 79.

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