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Food and Drug Administration Rockville MD 20857 Dennis Brydgc's Executive Officer Food and Agriculture Organization 1001 22nd Street, N.W. Washington, D.C. Dear Mr. Bridges: On behalf of the Food and Drug Administration, I am pleased to recognize the invitation of Mr. Sidney H. Rogers, Director, Investigation Branch to review the Food and Agriculture Organizations National Export Certification Program and its application in the field of export practices. The journey will take place in Rome, Italy from 10 to 27 July 2002. In accordance with your letter of May 12, 2002, we understand that your organization will refund the cost of airfares, lodging, meals and various expenses. Once Mr. Rogers has returned and presented his claim, you will be notified by our accounting department of the amount to be refunded. Checks should be made to the Food and Drug Administration. Attached for your reference is some general information about guidelines for FDA employees who speak or participate in external seminars and conferences. Sincerely, Malcolm Frazier Director, Office of Resource Management EnclosureFMD 13 Distribution: Regional Food and Drug Directors and District Directors FDA Headquarters Issued by: ORA/ORO/Division of Field Investigations (HFC-130) Publication Date: November 2002 In this section: What is hepatitis D? Hepatitis D is a viral infection that causes liver inflammation and injury. Inflammation is swelling that occurs when the tissues of the body become damaged or infected. Inflammation can damage organs. Viruses invade normal cells in your body. Many viruses cause infections that can spread from person to person. The hepatitis D virus is unusual because it can only infect you when you also have a hepatitis B virus infection. In this way, hepatitis D is a double infection. You can protect yourself from hepatitis D by protecting yourself from hepatitis B by getting the hepatitis B vaccine. Hepatitis D spreads in the same way that hepatitis B spreads, through contact with an infected person's blood or other bodily fluids. The hepatitis D virus can cause an acute or chronic infection, or both. Acute hepatitis D Acute hepatitis D is a short-term infection. The symptoms of acute hepatitis D are the same as the symptoms of all types of hepatitis and are often more severe.19 Sometimes your body is able to fight the infection and the virus disappears. Chronic hepatitis D Chronic hepatitis D is a long-term infection. Chronic hepatitis D occurs when your body is not able to fight the virus and the virus does not go away. People who have chronic hepatitis B and D develop complications more often and faster than people who have chronic hepatitis B alone.20 How do hepatitis D and hepatitis B infections occur together? Hepatitis D and hepatitis B infections may occur together as a coin infection or a People can only get infected with hepatitis D when they also have hepatitis B. Coinfection A coinfection occurs when you get both hepatitis D and hepatitis B infections at the same time. Coinfections usually cause acute, or short-term, hepatitis D and B infections. Coinfections can cause severe acute hepatitis. In most cases, people are able to recover from and fight the acute hepatitis D and B infections, and the viruses disappear. But in less than 5 percent of people with coin luck, both infections become chronic and do not go away.21 Super infection A super infection occurs if you already have chronic hepatitis B and then become infected with hepatitis D. When you get a super infection, you may have severe acute hepatitis symptoms.19 Up to 90 percent of people with super infection are unable to fight the hepatitis D virus , and develop chronic hepatitis D.20 As a result, these people will have both chronic hepatitis D and chronic hepatitis B. How common is hepatitis D? Hepatitis D is not common in the United States. Hepatitis D is more common in other parts of the world, including Eastern and Southern Europe; The Mediterranean region and the Middle East; parts of Asia, including Mongolia; Central Africa; and Amazona pool in South America.22,23 Who are more likely to have hepatitis D? Hepatitis D infection occurs only in people who have hepatitis B. People are more likely to have hepatitis D in addition to hepatitis B if they What are the complications of acute hepatitis D? In rare cases, acute hepatitis D can lead to acute liver failure, a condition in which the liver fails suddenly. Although acute liver failure is uncommon, hepatitis D and B infections are more likely to lead to acute liver failure than hepatitis B infection alone.24 What are complications of chronic hepatitis D? Chronic hepatitis D can lead to cirrhosis, liver failure, and liver cancer. People who have chronic hepatitis B and D are more likely to develop these complications than people who have chronic hepatitis B alone.20 Early diagnosis and treatment of chronic hepatitis B and D can reduce their chances of developing serious health problems. Cirrhosis Cirrhosis is a condition in which the liver slowly breaks down and cannot function normally. Scar tissue replaces healthy liver tissue, partially blocking blood flow through the liver. In the early stages of cirrhosis, the liver continues to function. As cirrhosis gets worse, the liver begins to fail. Liver failure Also called end-stage liver disease, liver failure develops over months or years. With end-stage liver disease, the liver can no longer perform important functions or replace damaged cells. Liver cancer Having chronic hepatitis B and chronic hepatitis D increases the chance of developing liver cancer. Your doctor may suggest blood tests and an ultrasound or other type of image test to for liver cancer. Finding cancer at an early stage improves the chance of curing the cancer. What are the symptoms of hepatitis D? Most people with acute hepatitis D have symptoms, which may include fatigue nausea and vomiting poor appetite pain over the liver, in the upper part of the abdomen darkening the color of urine lightening of the color of feces yellowish hue to the white of the eyes and skin, called jaundice In contrast, most people with chronic hepatitis D have few symptoms before complications develop , which can be several years after they became infected. Some symptoms of cirrhosis include weakness and fatigue weight loss swelling in the abdomen swelling of the ankles, called edema itching skin jaundice What causes hepatitis D? Hepatitis D virus causes hepatitis D. Hepatitis D virus spreads through contact with an infected person's blood or other bodily fluids. Contact can occur by sharing drug needles or other drug material with an infected person who has unprotected sex with an infected person who gets an accidental stick with a needle that was used on an infected person The Hepatitis D virus rarely spreads from mother to child during birth. You can't get hepatitis D from being coughed on or sneezed on by an infected person drinking water or eating food squeezing an infected person who shakes hands or holding hands with an infected person who shares spoons, forks and other eating utensils sitting next to an infected person How do doctors diagnose hepatitis D? Doctors diagnose hepatitis D based on your medical history, a physical exam and blood tests. If you have hepatitis D, your doctor may perform tests to check your liver. Medical history Your doctor will ask about your symptoms and about factors that may make you more likely to get hepatitis D. Physical exam During a physical exam, your doctor will look for signs of liver damage such as changes in skin color swelling of the legs, feet, or ankle soreness or swelling of the abdomen What tests do doctors use to diagnose hepatitis D? Doctors use blood tests to diagnose hepatitis D. Your doctor may order tests to check for liver damage, determine how much liver damage you have, or rule out other causes of liver disease. Blood test Your doctor may order one or more blood tests to diagnose hepatitis D. A healthcare professional will take a blood sample from you and send the sample to a laboratory. Your doctor may order one or more blood tests to diagnose hepatitis D. Additional tests If you have chronic hepatitis D and hepatitis B, you may experience liver damage. Your doctor may recommend tests to determine if you have liver damage or how much liver damage you have- or to rule out other causes of liver disease. These tests may include blood tests, elastography, a special ultrasound that measures the stiffness of your liver, a liver biopsy, in which a doctor a needle to take a small piece of tissue from your liver. A pathologist will examine the tissue under a microscope to check for signs of injury or illness. Doctors usually use liver biopsy only if other tests do not provide enough information about liver damage or disease. Talk to your doctor about which tests are best for you. How do doctors treat hepatitis D? Doctors can treat chronic hepatitis D with medicines called interferons, such as peginterferon alfa-2a (Pegasy). Researchers are studying new treatments for hepatitis D. In addition, medicines for hepatitis B may be needed. These are usually medications taken once a day by mouth. How do doctors treat the complications of hepatitis D? If chronic hepatitis D leads to cirrhosis, you should see a doctor specializing in liver diseases. Doctors can treat health problems related to cirrhosis with medications, surgery and other medical procedures. If you have cirrhosis, you have a better chance of developing liver cancer. Your doctor may order an ultrasound or other type of image test to check for liver cancer. If acute hepatitis D leads to acute liver failure, or if chronic hepatitis D leads to liver failure or liver cancer, you may need a liver transplant. How can I protect myself from hepatitis D infection? If you do not have hepatitis B, you can prevent hepatitis D infection by taking measures to prevent hepatitis B infection, such as getting the hepatitis B vaccine. If you don't get hepatitis B, you can't get hepatitis D. If you already have hepatitis B, you can take steps to prevent hepatitis D infection by not sharing drug needles or other drug materials that use gloves if you have to touch another person's blood or open wounds that don't share personal items like toothbrushes, razors or nail clippers How can I prevent the spread of hepatitis D to others? If you have hepatitis D, follow the steps above to avoid spreading the infection. Your sex partners should get a hepatitis B test, and if they are not infected, get the hepatitis B vaccine. Prevention of hepatitis B will also prevent hepatitis D. You can protect others from getting infected by telling your doctor, dentist and other health care provider that you have hepatitis D. Do not donate blood or blood products, semen, organs, or tissues. Is a hepatitis D vaccine available? No hepatitis D vaccine is currently available. The hepatitis B vaccine can prevent hepatitis D by preventing hepatitis B. Eating, diet and nutrition for hepatitis D If you have hepatitis D, you should eat a balanced, healthy diet. Talk to your doctor about healthy eating. You should also avoid alcohol because it can cause more liver damage. References [19] Farci P, Niro GA. Clinical features of hepatitis D. Seminars in liver disease. 2012;32(3):228U2012236. [20] Ahn J, Gish RG. Hepatitis D virus: a call to screening. Gastroenterology & Hepatology. [21] Roy PK. Hepatitis D. Medscape's website. . Updated May 16, 2017 Retrieved 5 October 2010. Cold Spring Harbor Perspectives in Medicine. 2015;5(7):a021576. [23] Hoofnagle JH. Hepatitis type D (Delta). In 1999, there were 100,000 people who became 1989;261(9):1321–1325. [24] Negro F, Lok ASF. Pathogenesis, epidemiology, natural history and clinical manifestations of hepatitis D viral infection. UpToDate website. . Updated May 20, 2017 Retrieved 5 July 2017.

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