

Viral hepatitis

Viral hepatitis

- is [liver inflammation](#) due to a viral infection.
- It may present in acute (recent infection, relatively rapid onset) or chronic forms.
- The most common causes of viral hepatitis are the five viruses [Hepatitis A](#), [Hepatitis B](#), [Hepatitis C](#), [Hepatitis D](#), and [Hepatitis E](#)

hepatitis A

- *Hepatitis A* or [infectious jaundice](#) is caused by hepatitis A virus (HAV).
- transmitted by the [fecal-oral route](#) often associated with ingestion of [contaminated food](#).
- It causes an acute form of hepatitis and does not have a chronic stage. The patient's [immune system](#) makes [antibodies](#) against HAV that confer [immunity](#) against future infection.

hepatitis A

- People with hepatitis A are advised to rest.
- stay hydrated and avoid alcohol.
- A vaccine is available that will prevent HAV infection for up to 10 years.
- Hepatitis A can be spread through personal contact, consumption of raw sea food or drinking [contaminated water](#). This occurs

Hepatitis C

- Hepatitis C is an [infectious disease](#) affecting primarily the [liver](#), caused by the [hepatitis C virus](#) (HCV).
- The infection is often [asymptomatic](#), but chronic infection can lead to scarring of the liver and ultimately to [cirrhosis](#), which is generally apparent after many years.

Hepatitis C

- In some cases, those with cirrhosis will go on to develop liver failure, liver cancer or life-threatening esophageal and gastric varices.
- HCV is spread primarily by blood-to-blood contact associated with intravenous drug use, poorly sterilized medical equipment and transfusions

Hepatitis B

- Hepatitis B is an infectious inflammatory illness of the [liver](#) caused by the [hepatitis B virus](#) (HBV) that affects [hominoidea](#), including humans.
- Originally known as "serum hepatitis", the disease has caused [epidemics](#) in parts of [Asia](#) and [Africa](#), and it is [endemic](#) in [China](#).

Hepatitis B

- Transmission of hepatitis B virus results from exposure to infectious blood or body fluids containing blood.
- Possible forms of transmission include [sexual contact](#), [blood transfusions](#) and transfusion with other human blood products, [re-use of contaminated needles](#) and syringes, and [vertical transmission](#) from mother to child during childbirth

Hepatitis B

- The virus is transmitted by exposure to infectious blood or body fluids such as semen and vaginal fluids, while viral DNA has been detected in the saliva, tears, and urine of chronic carriers
- Other risk factors for developing HBV infection include working in a healthcare setting.

Hepatitis B

- [transfusions](#), [dialysis](#), [acupuncture](#), tattooing, sharing razors or toothbrushes with an infected person
- possibly by contact of nonintact skin or mucous membrane with secretions or saliva containing HBV
- and [vertical transmission](#) from mother to child during childbirth.

Sign & symptom

- Acute infection with hepatitis B virus is associated with acute viral [hepatitis](#) – an illness that begins with general ill-health.
- loss of appetite, nausea, vomiting.
- body aches, mild fever, and dark urine.

Sign & symptom

- then progresses to development of [jaundice](#).
- It has been noted that itchy skin has been an indication as a possible symptom of all hepatitis virus types.
- The illness lasts for a few weeks and then gradually improves in most affected people

Sign & symptom

- Chronic infection with hepatitis B virus either may be asymptomatic or may be associated with a chronic inflammation of the liver (chronic hepatitis), leading to [cirrhosis](#) over a period of several years.
- This type of infection dramatically increases the incidence of [hepatocellular carcinoma](#) (liver cancer).

investigation

- The tests, called [assays](#), for detection of hepatitis B virus infection involve [serum](#) or [blood tests](#) that detect either viral antigens (proteins produced by the virus)
- or [antibodies](#) produced by the host. Interpretation of these assays is complex

Treatment

These include antiviral drugs:-

- lamivudine (Epivir).
- adefovir (Hepsera).
- tenofovir (Viread).
- telbivudine (Tyzeka).
- entecavir (Baraclude).

NURSING DIAGNOSIS

Common nursing diagnoses for the patient with viral hepatitis are as follows:

- Imbalanced nutrition, less than body requirements related to anorexia, nausea, or vomiting
- Risk for impaired skin integrity related to itching secondary to bilirubin pigment deposits in skin

NURSING DIAGNOSIS

- Pain related to inflammation and enlargement of the liver
- Risk for ineffective management of therapeutic regimen related to lack of knowledge of hepatitis and its treatment.

PLANNING

Major goals for the patient with viral hepatitis

include that the patient will have :-

- adequate nutrition.
- pain and other discomforts as tolerable.
- able to self-manage the treatment regimen for viral hepatitis.

IMPLEMENTATION

- Imbalanced Nutrition. The usual ordered diet is:-
- a high calorie, high-protein, high-carbohydrate, low-fat diet.
- There are no restrictions on what the patient may eat, but the focus is to provide a well-rounded, nutritious diet.
- Give the patient antiemetic drugs as ordered

Imbalanced Nutrition

- Place the patient in an upright or sitting position for meals to decrease abdominal discomfort.
- Serve meals in a quiet, pleasing environment without unpleasant noise or odors that may decrease appetite

Risk for Impaired Skin Integrity

- The physician may order an antihistamine to decrease the itching related to bilirubin pigment deposits in skin.
- Encourage the patient not to scratch, but to press firmly on the itching area.

Risk for Impaired Skin Integrity

- Encourage the patient to keep fingernails trimmed short so that vigorous scratching does not tear the skin.
- Maintain room temperature at a comfortable level to decrease perspiration, which may increase itching

Pain

- The physician may order analgesics to decrease the pain related to inflammation and enlargement of the liver.
- The analgesics are administered as ordered. The patient is
- evaluated frequently for abdominal pain and the extent of any RUQ tenderness.

Ineffective Management

- Teach the patient the necessity of proper home cleanliness, including :
 - hand washing after toileting and using soap
 - and hot water to clean eating utensils, cookware, and food preparation surfaces.
- Teach patients how hepatitis affects their body and the importance of adequate rest and proper nutrition.

Self-Care

- Teaching Patients Self-Care. Because of the prolonged period of convalescence.
- the patient and family must be prepared for home care.
- The nurse informs family members and friends who have had intimate contact with the patient about the risks of contracting hepatitis B

Self-Care

- makes arrangements for them to receive hepatitis B vaccine or hepatitis B immune globulin as prescribed
- Teach the importance of avoiding alcohol and other liver-toxic drugs.
- and the patient and family's understanding of the importance of adequate rest and nutrition

Continuing Care

- Continuing Care. Follow-up visits by a home care nurse may be needed to assess the patient's progress and answer family members' questions about disease transmission.
- A home visit also permits assessment of the patient's physical and psychological status

prevention

- personal hygiene and the avoidance of raw and unpeeled foods can help prevent an infection.
- Infected people excrete HAV with their [feces](#) two weeks before and one week after the appearance of [jaundice](#).

prevention

- Several [vaccines](#) have been developed for the prevention of hepatitis B virus infection
- The time between the infection and the start of the illness averages 28 days