



INTRODUCTION

Viral hepatitis is a major global public health problem in developing and developed countries (*Holtz, 2008*). It is a systematic disorder that primarily involves the liver causing diffuse hepatocellular inflammation, which leads to characteristic constellation of clinical, biochemical, and pathological changes. Hepatotropic viruses are designated hepatitis A,B,C,D,E and G viruses. All five primary hepatitis viruses can cause acute disease except for HGV, which appears to cause no or mild disease (*Basvanthappa, 2008*).

Hepatitis A is a form of viral hepatitis also known as infectious hepatitis due to its ability to be spread through personal contact. It is an inflammation of the liver caused by hepatitis A virus (HAV). It varies in severity, running an acute course, generally starting within two to six weeks after contact with the virus, and lasting no longer than two to three months (*Bergelson et al., 2008*).

In developing countries, and in regions with poor hygiene standards, the incidence of infection with the virus is high and the illness usually contracted in early childhood (*Steffen, 2005*). It has worldwide distribution and endemic in most countries and there is a very high incidence in rural areas (*Wilson, 2005*). Infection with (HAV) occurs worldwide and is the most common cause of acute viral hepatitis, which is most commonly transmitted by fecal-oral-route via contaminated food or drinking water (*Carter, 2005*).

Hepatitis A virus can spread from person to person by putting something in the mouth that has been contaminated with the stool of person infected with hepatitis A, and it is the most common type found in children and young adults but HAV can occurs at all ages. Usually a



group with low socioeconomic status will be more affected due to bad hygienic habits (*Lee, 2007*).

Children are the chief victims, but very often have no more than a flu-like illness or called sub clinical infection. The symptoms include: an abrupt onset to fever, fatigue, abdominal pain, nausea, vomiting, loss of appetite, weight loss, itching, jaundice, and darkened colored urine and clay colored stool (*Chan et al., 2006*).

The community health nursing plays an important role, focuses on preventing spread of infection to others, and promoting the clients' comfort and ability to provide self care (*Mcevoy, 2006*). Control of further spread is essential. Because survive on contaminated objects for weeks, good hand washing and thorough disinfection are imperative for children and adults who have direct contact with a person infected with HAV, they should receive immunoglobulin (IG) as soon as possible after exposure. A vaccine has been developed to prevent HAV infection, and immunization is currently recommended for all children groups aged from one year as well other high risk groups (*centers of disease control and prevention, 2006*).

The nurse assists the child, and family in coping with temporary disability and fatigue that are common in hepatitis, and instructs them to seek additional health care if the symptoms persist or worsen self care at home. That the child is usually managed at home unless symptoms are severe. So, parental education about adequate nutrition is important for immune function and healing in patients with acute or chronic hepatitis and the responsibility of the nurse to educate mothers how they can restore the child health (*Gulanick et al, 2007*).



Magnitude of the problem:

Children represent an important highly vulnerable group of the population. In Egypt, from birth up to five years were constitute 14-15% of total population and health promotion during childhood is vitally important because it is a critical period of the life span that the learning of health related behaviors, attitudes, values and perception take place during early years that this can provide the basis for health related behaviors during adulthood (*Pender et al., 2005*).

In developing countries, infection is highly endemic, nearly 100% of population has serologic evidence of past hepatitis A virus disease during childhood (*Bennett, 2006*). The problem of viral hepatitis in Egypt is still a serious problem therefore many studies were made to estimate the incidence of HAV (*Meky et al., 2006*) The incidence of hepatitis A virus infection affects individuals of all ages, but the highest incidence occurs among preschool or school age children younger than 15 years (*Reger and Schiff, 2000; and Hockenberry et al., 2005*). The incidence of hepatitis A virus in Kalubia governorate in 2009 was 349 cases (*Governorate of Health Affairs and Population, 2010*).

In children under 6 years most infections are a symptomatic but in older children, and adults, infection is usually much more likely to be symptomatic and the incidence of jaundice is approximately 5 to 10% in children younger than 5 years, 65% in children between 5 and 17 years, and up to 90% in adults (*Bennett, 2006*).