Strategies to Address HCV

HIV Programs & U.S. Viral Hepatitis Action Plan

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The Evolution of Our National Response

2010

2011

2014

Hepatitis and Liver Cancer
A National Strategy for Prevention and Control of Hepatitis B and C

Combating the Silent Epidemic of Viral Hepatitis
Action Plan for the Prevention, Care & Treatment of Viral Hepatitis

Updated
2014-2016

Action Plan for the Prevention, Care, & Treatment of Viral Hepatitis
Intersections of HIV & Viral Hepatitis

Among individuals coinfected with HIV:

- An estimated 25% are coinfected with HCV*
- An estimated 10% are coinfected with HBV

HIV, hepatitis B, and hepatitis C share:

- Modes of transmission: sexual, blood exposure, perinatal
- Vulnerable populations: high risk heterosexuals, MSM, people who inject drugs, others
- Prevention opportunities: education, vaccination for HBV, testing, reducing exposure to contaminated blood
- Health disparities affect some of the same communities

* Prevalence is much higher among people who inject drugs
HIV/HCV Coinfection

- HIV hastens progression of HCV-related liver disease
- Liver disease is one of the leading causes of death among people living with HIV/AIDS
- There are increasing reports of HCV infection among HIV+ MSM
  - Associated risks: unprotected rectal intercourse; drug use
- Guidance for HCV treatment makes HIV-1 coininfected patients ‘high priority’ owing to high risk for complications
- HCV CAN BE CURED!!!
Modeling the Growing Burden of Hepatitis C in the United States

Of 2.7 million HCV-infected persons

- 1.47 million will develop decompensated cirrhosis (DCC)
- 350,000 will develop hepatocellular carcinoma (HCC)
- 897,000 will die from HCV-related complications

(Based on a model presented by Rein et al. *Dig Liver Dis* 2011;43:66-72.)
Stages of the HCV Continuum of Care, US

Only 9% of people living with HCV are CURED

(Yehia et al, PLOS One, 2014)
150% Increase in Reported HCV Cases 2010-2013

Reported number of acute hepatitis C cases 2000-2013

CDC, National Notifiable Diseases Surveillance System
Increases in New HCV Infections

- 50% increase in national reporting
- 200% increase in 17 states
- Recent studies show
  - ~70% PWID
  - Previous prescription narcotic users
  - Ages 18 to 29 years
  - Predominantly white
  - Equally female and male
  - Non-urban and suburban

2007-2012

People who inject drugs

CDC/hepatitis.gov; MMWR 2011; MMWR 2014; CDC unpublished data.
• One-time testing for persons born 1945-1965
• Major risk
  • Past or present injection drug use
• Other risks
  • Received blood/organs prior to June 1992
  • Received blood products made prior to 1987
  • Ever on chronic hemodialysis
  • Infants born to HCV infected mothers
  • Intranasal drug use
  • Unregulated tattoo
  • History of incarceration
• Medical
  • Persistently elevated ALT (liver enzymes)
  • HIV infection (annual testing)
Opportunities in the Updated NHAS

Updated through 2020, the NHAS includes hepatitis in many areas:

- Expand efforts to prevent HIV using a combination of effective, evidence-based approaches
- Support and strengthen integrated and patient-centered HIV and related screening
- Address increases in substance use disorders
- Address co-occurring disorders in people with HIV
Affordable Care Act Opportunities

- Elimination of pre-existing condition restrictions
- Expanded access to health insurance
- Preventive health care coverage
  - Screening for HBV & HCV
  - Vaccination for HAV & HBV
HCV Therapy is Curative

The goal of HCV therapy is HCV clearance known as sustained virologic response (SVR) ¹

HCV therapy is undergoing a revolution!

SVR = CURE

OLD therapy: 48 weeks PegIFN/Ribaviron
  < 50% cure rates

NEW therapy: 8 – 24 weeks all oral therapy
  90-99% cure rates

¹ Ghany M, et al Hepatology 2009;
Stakeholders’ Workbook

**Purpose:** Facilitate opportunities to talk through potential activities, challenges, tools, resources, and partnerships related to each priority area.

- Discussion questions provided, e.g.,
  - *What are the best ways to identify persons with chronic viral hepatitis who do not know they are infected? What can your organization do to promote this?*

- Sample hepatitis planning sheet to prioritize, set timeframes, & measures

Available at: [www.AIDS.gov/hepatitis](http://www.AIDS.gov/hepatitis)
“A nation committed to combating the silent epidemic of viral hepatitis”

-Vision of the Action Plan for the Prevention, Care and Treatment of Viral Hepatitis