THE "SECRET" EPIDEMIC:

DISPARITIES IN HEPATITIS C
INCIDENCE, TREATMENT, AND OUTCOMES
Report Overview

- Hepatitis C: Disease Overview
- HCV Prevention and African American Communities
- Improving HCV Screening and Diagnosis Among African Americans
- Eliminating Disparities in HCV Treatment and Outcomes
- Conclusion
Hepatitis C: Disease Overview

- **Course of Infection**

- **Burden**
  - 2.7-3.9 million infected
  - 75% of infected are unaware
HCV Prevention and African American Communities

- In the general population, 55% to 85% of individuals exposed to HCV become chronically infected. This rate is much higher in African Americans (87 to 95%) than in whites (66-67%)*

- CDC National Hepatitis C Prevention Strategy
  - 2001

- IOM Recommendations
  - January 2010

*Rosen HR, Weston SJ, Im, K, et. al. Selective Decrease in Hepatitis C Virus-Specific Immunity Among African Americans and Outcome of Antiviral Therapy. Hepatology 2007;46:350-357
Strategies for preventing HCV in communities of color:

• *Expansion of programs to reduce the risk of HCV infection through injection drug use*

• *Development of education programs for health care professionals and other social service providers regarding HCV*

• *Construction of community-based outreach and education programs to inform the general public about mitigating their risk for HCV infection*
Improving HCV Screening and Diagnosis Among African Americans

- Patient-level barriers to HCV screening
  - Access to primary care services
  - Stigma attached to HCV risk factors (IDU)

- Provider-level barriers to HCV screening
  - Risk factor assessment
  - Testing patients at risk

- Screening recommendations
  - CDC 1998 Recommendation
  - NIH 2002 Recommendation
  - USPSTF 2004 Recommendation
Strategies for improving HCV screening and diagnosis in minority communities:

- **Depart from current focus on risk factor identification as the impetus for HCV screening**

- **Implement alternative screening models for infection, focusing on community outreach and utilization of trusted community establishments**

- **Increase funding at the state and federal levels for screening services to be implemented in communities**
Eliminating Disparities in HCV Treatment and Outcomes

- Treatment regimen
  - Peginterferon + ribavirin
- HCV genotype
- Morbidity/mortality disparities
Strategies for eliminating disparities in HCV treatment and outcomes:

• *Increase African American enrollment in clinical trials that involve HCV treatment*

• *Support pharmaceutical innovation in developing alternative treatments for HCV that may be more conducive to better compliance*
Conclusion

• The failure to adequately prevent, screen, diagnose, and treat HCV resonates as both an unfortunate health equity issue and serious threat to our nation’s financial security
  ▫ Over the next 20 years, total annual medical costs for patients with HCV infection would exceed $85 billion
  ▫ Medicare costs alone for HCV over the next two decades will increase fivefold, from $5 billion to $30 billion
Roundtable Participants - May 3, 2010

- Dr. Regina Benjamin  
  Surgeon General of the United States
- Mr. Chris Brown  
  Assistant Commissioner STD/HIV/AIDS Division for the Chicago Department of Public Health
- Ms. Tonja Cook  
  President/CEO of the HIV/AIDS Social Service Agency, Inc.
- Mr. Matt Emmens  
  Chairman, President and CEO of Vertex
- Dr. Scott Holmberg  
  Epidemiology and Surveillance Branch, Division of Viral Hepatitis, CDC
- Ms. Marjorie Innocent  
  Senior Director of research and programs at the Congressional Black Caucus Foundation Inc.
- Dr. Gary Puckrein  
  President and CEO of the National Minority Quality Forum Inc
- Dr. Wayne Riley  
  President and Chief Executive Officer of Meharry Medical College
- Dr. David Satcher  
  Director, The Satcher Health Leadership Institute and Center of Excellence on Health Disparities
- Mr. Harry Simpson  
  Expert consultant to the National Institute on Drug Abuse, the Centers for Disease Control and Prevention
- Rep. Calvin Smyre  
  State Representative of Georgia - President, National Black Caucus of State Legislators
- Mr. Richard Zimmerman  
  Program Coordinator for the Counseling and Testing Program at the Illinois Department of Public Health (IDPH)