

Hepatitis C in North Carolina: Two Epidemics with One Public Health Response

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State Health Director's Conference

January 21, 2016

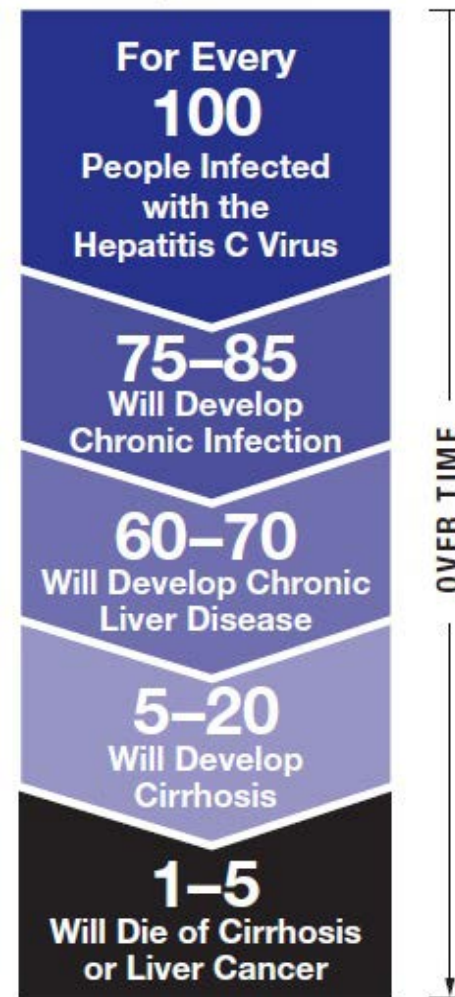


Overview

- Review hepatitis C background information
- Describe the epidemiology of hepatitis C
- Discuss public health initiatives to address hepatitis C in NC

Hepatitis C

- Most commonly transmitted through injection drug use
- 75%–85% of infected develop chronic illness



Two epidemics of hepatitis C

- Chronic
 - Increasing cause of morbidity and mortality
 - 75% of cases among “baby boomers”
 - 50% unaware of infection



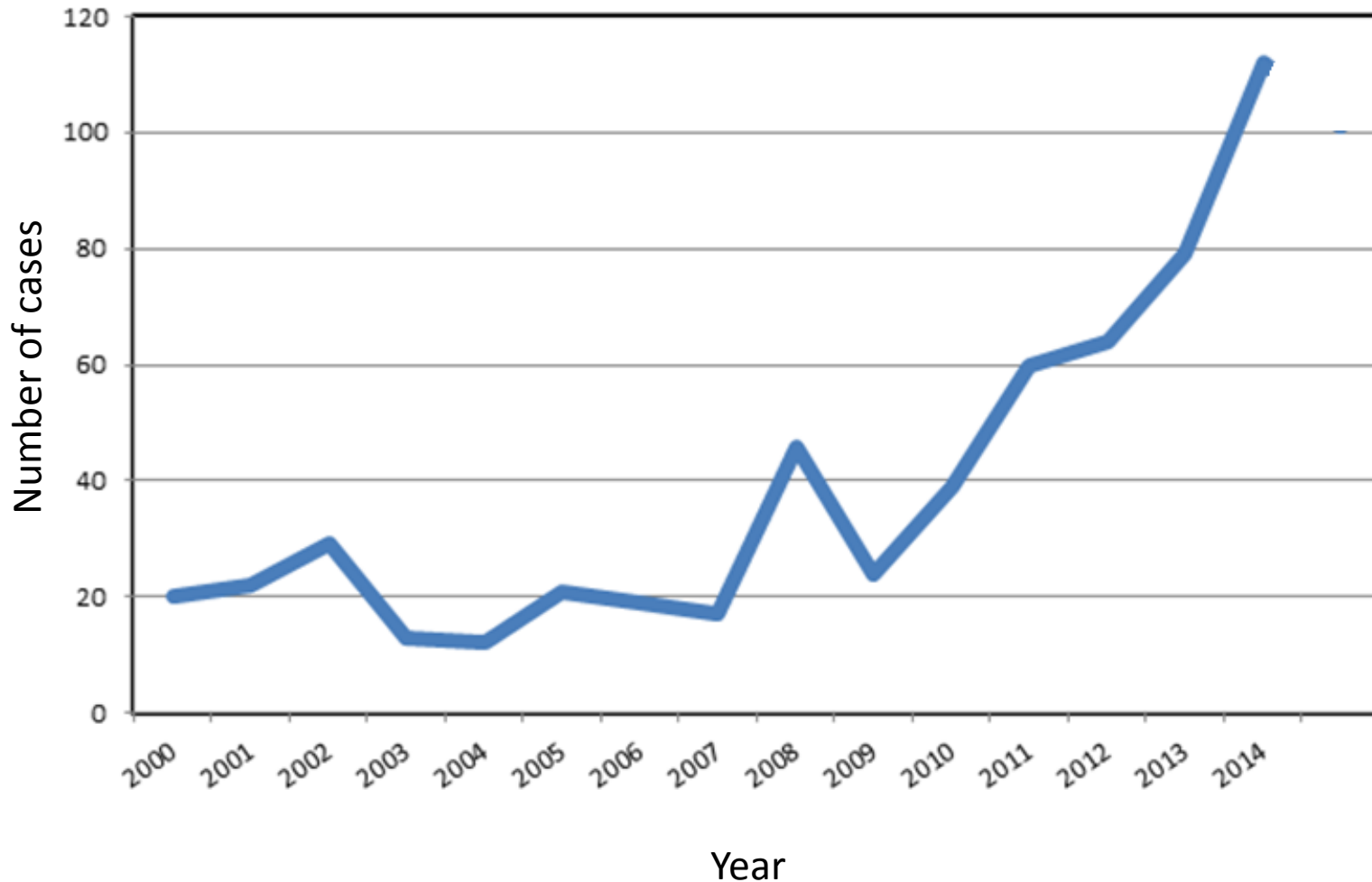
CDC

- Acute
 - Emerging epidemic
 - Young persons who injection drugs
 - Coincides with increasing use of injectable opioids



CDC

Reported acute hepatitis C cases, NC, 2000–2014



Characteristics of reported acute hep C cases, NC, 2014 (N = 113)

Characteristic	N (%)
<u>Race/ethnicity</u>	
White	96 (85%)
Black	5 (4%)
Hispanic	3 (3%)
Other	9 (8%)
<u>Age (years)</u>	
<20	7 (6%)
21-30	47 (41%)
31-40	27 (24%)
41-50	21 (19%)
>50	11 (10%)
<u>Gender</u>	
Male	60 (53%)
Female	51 (45%)
Missing	2 (2%)
<u>Reported risk factors*</u>	
Injection drug use	42 (37%)
Multiple sex partners	5 (4%)
Men who have sex with men	2 (2%)
History of blood transfusion	1 (1%)
Missing	63 (56%)

*May report >1 risk factor

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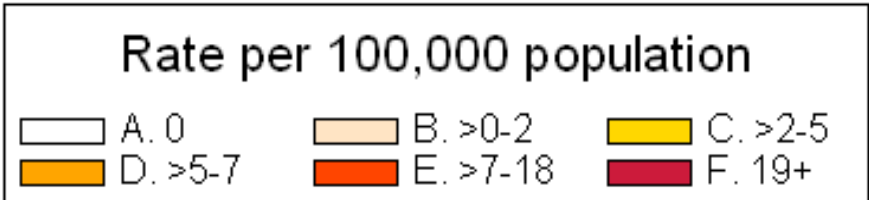
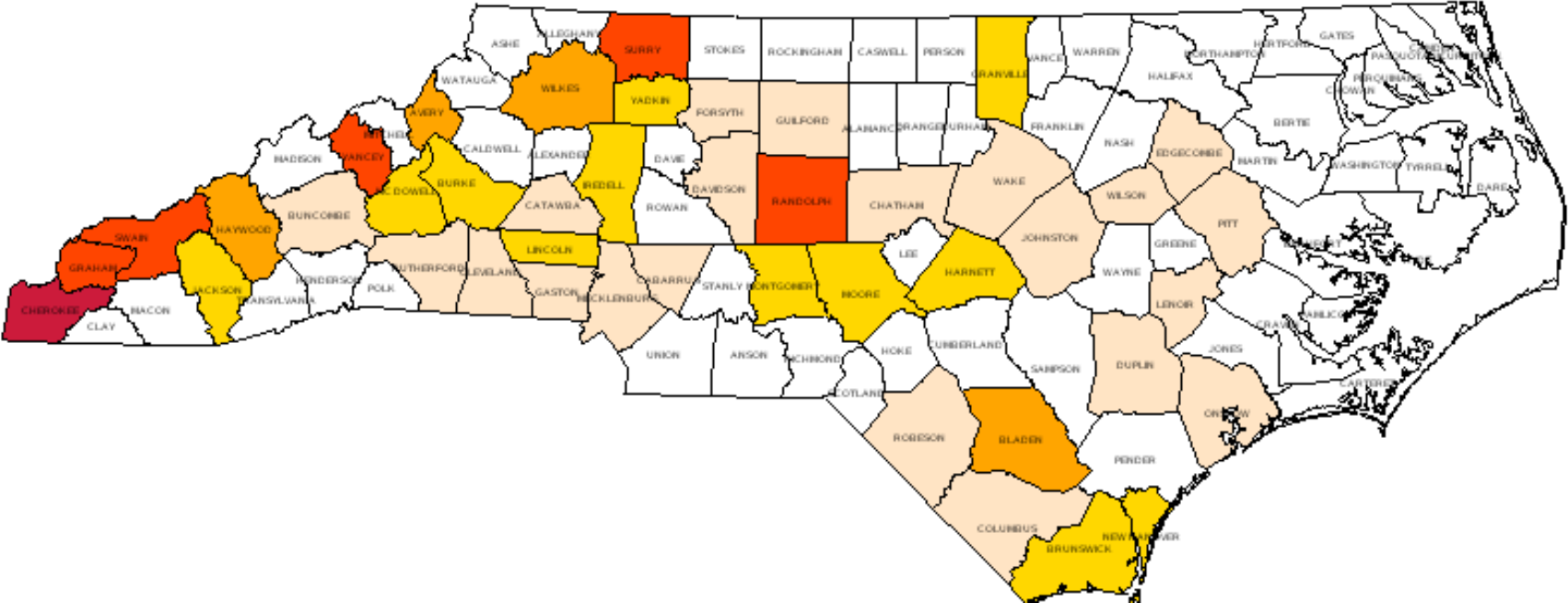
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Rates of reported acute hepatitis C cases by county, NC, 2014



Counties most vulnerable to a hepatitis C/HIV outbreak

- Data sources
 - Emergency department visits for opioid overdose
 - Reported cases of acute hepatitis C
 - Chronic hepatitis C data from Medicaid
 - Percent white population
 - Percent unemployment
- Identified 11 most vulnerable NC counties, all in western NC

What about chronic hepatitis C in NC?

- Not reportable by law
- Use CDC national prevalence projections (1.1%) and census data to estimate



Changing landscape of hepatitis C treatment

- Older drugs
 - Prolonged treatment
 - Serious side effects
- New direct acting antivirals (DAAs)
 - Shorter treatment
 - Fewer serious side effects
 - Highly effective
 - Expensive
 - Mainly prescribed by specialists



Public health response to hepatitis C in NC

- Enhanced surveillance
 - Chronic hepatitis C reportable through ELR (electronic laboratory reporting)
- Outreach and screening
 - Targeted screening of high risk groups
 - Client education
 - Hepatitis A/B vaccination
- Linkage to cure
 - Hepatitis C Bridge Counselors
 - Expanded primary care capacity to treat HCV