

Get Hip to Hep: Partnerships for Prevention

California Immunization Coalition Summit,
Sacramento, May 3, 2010

Overview

1. Introduce the California Adult Viral Hepatitis Prevention Strategic Plan
2. Highlight vaccine and health disparities-related recommendations
3. Describe Adult Hepatitis Vaccine Project
4. Learn from 2 community-based programs:
 - Los Angeles County Sheriffs Department
 - Alameda County Hep B Free Campaign
5. Identify resources for further information

California Adult Viral Hepatitis Prevention Strategic Plan, 2010 – 2014

**A Report of the
California Adult Viral Hepatitis Prevention
Coordinating Committee and
the California Department of Public Health,
Center for Infectious Diseases**

Need for Adult Viral Hepatitis Prevention Strategic Plan

- Adult viral hepatitis is a serious, costly and significant public health problem
- By 2030, liver cancer deaths are expected to triple, along with related costs
- **Most people with viral hepatitis (VH) are unaware of their infection or not in care**
- Cost effective interventions exist
- No coordinated strategy for adult VH prevention and control in California

Hepatitis B Virus (HBV) Overview

- 800K - 1.4 million chronic HBV cases in the U.S.
- Acute HBV incidence highest in African-American males
- APIs 4.5% of U.S. population, 11% of CA pop., >50% people w/ chronic HBV in the U.S.
- 25% of adults with chronic HBV will die of liver disease or liver cancer
- HBV hospitalization costs in CA, 2007: \$316M
- HBV is vaccine preventable!

HBV Vaccination

- 3 doses: (0, 1, 6 months)
- Each dose protects (50%, 85%, 96%)
- No need for boosters or to re-start series
- HAV/HBV vaccine: “Twinrix”
- Alternate schedule available: (0, 7 days, 21 days, 30 days, 12 months)



Who should get vaccinated?

- 18 yrs of age or younger, including babies
- Men who have sex with men (MSM)
- Sexual/household contacts of HBsAg+
- Multiple sex partners, history of/current STD
- Healthcare workers
- Injection drug users
- People with HIV, HCV, or liver disease
- Hemodialysis patients
- Incarcerated individuals
- People born in countries with $\geq 2\%$ prevalence, and their children

Viral Hepatitis Prevention Strategic Planning Process

- Informed by
 - Key informant interviews in CA
 - National best practices
 - Stakeholders meeting: September 22-23, 2008
- Stakeholders included more than 80 partners
 - State: CDPH, DHCS, DMH, ADP, CDCR
 - LHJs, CBOs, labs, and community groups
- Three strategic directions, which include recommendations, action steps, and evaluation measures

Strategic Directions



SD 1

Improving Surveillance Capacity and Data Use



SD 2

Educating the Public, Providers, and Policymakers



SD 3

Targeting and Integrating Services and Building Infrastructure

California Adult Viral Hepatitis Prevention Strategic Plan, 2010 - 2014

Recommendations

SD 1: Improving Surveillance Capacity and Data Use

1. Generate local and statewide surveillance reports
2. Evaluate VH reporting requirements to improve quality & use of VH surveillance data
3. Increase local and state VH surveillance capacity
4. Incorporate VH surveillance into the Cal-REDIE system
5. *Assess VH prevalence and risk factors among at risk groups in CA**

**emphasis added*

SD2: Educating the Public, Providers, and Policymakers

1. *Develop health promotion and awareness strategies for educating the public about VH*
 - *culturally/linguistically appropriate, data-driven*
 - *focused on wellness to avoid reinforcing stigma*
 - *designed in collaboration w/ affected groups*
2. Integrate VH prevention content into medically accurate, school-based HIV/STD education curricula
3. Train non-clinical providers serving at-risk adults on how to integrate adult VH prevention into their services

SD2: Educating the Public, Providers, and Policymakers

4. *Improve clinicians' understanding and adherence to national adult VH risk screening, prevention, vaccination, and clinical management guidelines*
5. Develop statewide adult VH referral guide
6. Increase adult VH awareness among local, state, and federal policymakers
7. Ensure national adult VH standards reflect updated and evidence-based VH prevention and care recommendations

SD3: Targeting and Integrating Services and Building Infrastructure

- 1. Increase adult VH counseling, testing, and health education capacity and services*
 - support testing and care for household/sexual contacts of people with chronic HBV infection*
 - increase language access capacity for CHCs serving non-English speaking clients*
2. Increase VH laboratory testing capacity
3. Increase adult VH vaccination capacity and delivery
4. Increase access to syringe exchange and other harm reduction services

SD3: Targeting and Integrating Services and Building Infrastructure

5. Increase VH prevention education, testing, and vaccination services for people who are incarcerated or returning from prisons and jails to the community
6. Enhance adult VH prevention service integration in state and local public health, mental health, alcohol and drug, and criminal justice programs
7. Promote adult VH prevention services integration and increased access to adult VH prevention, testing, education, and care in federal agencies

Adult Hepatitis Vaccine Project

- HBV or combination HAV/HBV vaccine for LHJs and CBOs serving at-risk adults
- Targeted Settings:
 - Primary care clinics, local health departments, STD clinics
 - HIV prevention & care programs
 - Drug treatment programs, jails, prisons
 - Clinics serving foreign-born individuals from countries with >2% endemic HBV, and their children
- Uses federal 317 dollars
- 54,257 doses administered in 2008-2009
 - 250 sites
 - 12 clinics serving primarily Asian Americans and Pacific Islanders

CA Adult Hepatitis Vaccine Project, November 1, 2008 – June 30, 2009

Setting Type	Orgs	Sites	A	B	AB	Totals
LHD	35	82	2,630	4,193	6,568	13,391
STD Clinic	13	13	336	553	2,295	3,184
Jail	13	16	63	182	2,582	2,827
Primary Care	62	66	557	750	1,241	2,548
AAPI Clinic	12	12	368	1,032	479	1,879
Syringe Exchange	4	4	59	19	888	966
Prison	1	5	71	260	553	884
Drug Treatment	13	28	92	78	406	576
HIV Testing	10	10	4	55	93	152
Total	163	236	4,180	7,122	15,105	26,407

Next Steps

- Leverage existing resources to implement plan and identify funding opportunities
- Specific areas of focus for coming year:
 - Increase participation in Adult Hepatitis Vaccine Project and CA IZ Registry
 - Increase awareness/use of VH screening, vaccination guidelines among providers
 - Increase HBV/HCV screening, HAV/HBV vaccination in CHCs, drug treatment, jails

Viral Hepatitis Resources

- Centers for Disease Control

www.cdc.gov/hepatitis

- Office of Viral Hepatitis Prevention

www.cdph.ca.gov/programs/pages/ovhp.aspx

- Adult Hepatitis Vaccine Project

www.cdph.ca.gov/programs/immunize/Pages/AHVP.aspx

Contact Information

Rachel McLean, MPH
California Department of Public Health
STD Control Branch
Ph: 510-620-3403
Rachel.McLean@cdph.ca.gov
www.cdph.ca.gov/programs/pages/ovhp.aspx

Contact Information

Dr. Jennifer H. Ong

Coordinator,

Alameda County Hepatitis B Free Campaign

2223 Santa Clara Ave., Suite A

Alameda, CA 94501

Ph: (510)521-0551

drjenniferong@gmail.com

Reference model program: www.sfhepbfree.org