Integrating Viral Hepatitis Services into Addictions Treatment

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Caring Ambassadors Program

• Mission: Improve the lives of patients and communities by empowering them to be advocates for their own health

• National, nonprofit organization established in 1997 and headquartered in Portland, OR

Lung Cancer Program – Seattle, WA

My Journey, My Choices – DC

Hepatitis C Program – Chicago, IL
Caring Ambassadors Program
Hepatitis C Program

• Macro
  • Policy and advocacy for restriction removal/reduction
  • Coordination of Syndemic Roundtable: HCV & Opioids

• Mezzo
  • HCV capacity building with systems
  • Community task force engagement & leadership

• Micro
  • Story Collection
  • Patient disease literacy
  • Rapid HCV antibody testing
Objectives

• Understand the impact of infectious diseases and hepatitis C on people who use drugs
• Explore the components of viral hepatitis program integration
• Discuss some clinical and program considerations for viral hepatitis program integration
1. According to the CDC, a syndemic is a synergistically interacting epidemic.

2. According to MedicineNet.com, a syndemic is a set of linked health problems involving two or more afflictions, interacting synergistically, and contributing to excess burden of disease in a population.

http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(17)30003-X/fulltext
Why are we talking hepatitis?

HEPATITIS C AND OPIOID INJECTION ROSE DRAMATICALLY IN YOUNGER AMERICANS FROM 2004-2014

- Among people aged 18-29, HCV increased by 400% and admission for opioid injection by 622%
- Among people aged 30-39, HCV increased by 325% and admission for opioid injection by 83%

Source: Centers for Disease Control and Prevention and Substance Abuse and Mental Health Services Administration
Why are we talking hepatitis?

HEPATITIS C AND OPIOID INJECTION ROSE DRAMATICALLY AMONG WOMEN FROM 2004-2014

- HCV increased by 250%
- Admissions for opioid injection increased by 99%

Source: Centers for Disease Control and Prevention and Substance Abuse and Mental Health Services Administration
Syndemics & Virology:
In one drop of blood with HBV, HCV and HIV...

- 30% chance of transmitting
- 1.8% chance of transmitting
- 0.03% chance of transmitting

Syndemics & Virology:
Impact of Infectious Diseases on PWUD

Duration of Injection Drug Use and the Prevalence of Blood-Borne Viruses

Estimated Seroprevalence (%)

Duration of Injection Drug Use (Months)

Models & Spectrums

- Pre-Contemplation
- Contemplation
- Preparation
- Action
- Maintenance

- OR/engagement
  - Detox – Medical/Social
  - Residential Tx
  - Recovery Home
  - Outpatient
  - Independent Living, Sobriety, Wellness

- Undx
- Dx
- Staging
- Tx
- Cure
- Wellness
Integration Components

**Prevention**
- Education
- Screening & Testing
- Vaccination
- Re-Infection
- Liver Cancer

**Linkage to Cure**
- Staging
- Knowledge
- Obtain Approval on Prior Authorization
- Treat
- Adhere
- Cure

**Wellness & Advocacy**
- Recovery
- Harm Reduction
- Prevention
- Support
- Engagement & Social Justice
Integration Component: Prevention

**Prevention Education:**

| Knowledge: | Staff & client education to increase disease knowledge, testing & diagnosis process, transmission and testing resources, education on re-infection |
| Resources: | Existing HIV resources for education and parallel testing; SAMHSA dollars can be leveraged for HCV |

**Screening & Testing**

| System: | Executive and staff buy-in; testing integration |
| Administrative: | Administrative code on reporting & report structure; CLIA Waiver – new or add; Physician Standing Order (PSO); Patient consent form w/reporting info |
| Knowledge | Opportunities to engage staff through training on testing technology, providing testing opportunities for staff, and disease education |
| Resources: | Patient Assistance Programs for Diagnostics; Referral options for linkage to cure; Laboratory; OraSure; Caring Ambassadors |
## Integration Component: Prevention

### Vaccination

<table>
<thead>
<tr>
<th>System:</th>
<th>Inoculation Schedule: Standard vs. Accelerated</th>
</tr>
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<tbody>
<tr>
<td>Administrative:</td>
<td>PSO for Management of Vaccine Reactions in Patients; PSO for provision of vaccine; Cost &amp; Reimbursement - 317 funds/obtain vaccine</td>
</tr>
<tr>
<td>Resources:</td>
<td>Vaccine type: HAV, HBV or Twinrix (both); Immunization Action Coalition – <a href="http://www.immunize.org">www.immunize.org</a></td>
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<tr>
<td>Knowledge:</td>
<td>Training of Staff for storage and monitoring; Staff monitoring &amp; follow-up for schedule completion</td>
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### Prevention of Re-Infection & Liver Cancer

<table>
<thead>
<tr>
<th>System:</th>
<th>Surveillance and follow-up protocols with patients with advanced disease</th>
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<tbody>
<tr>
<td>Resources:</td>
<td>Knowledge of Syringe Service Programs; Screening options for ongoing risk</td>
</tr>
<tr>
<td>Knowledge:</td>
<td>Education about transmission, infection and lack of immunity</td>
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Integration Components: **Linkage to Cure**

**Staging:** process of identifying the extent of liver damage and measured by fibrosis level:

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<th>F1</th>
<th>F2</th>
<th>F3</th>
<th>F4</th>
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<tbody>
<tr>
<td>No fibrosis</td>
<td>Little Fibrosis</td>
<td>Some Fibrosis</td>
<td>Advanced Stage - Cirrhosis</td>
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</tbody>
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**System:** Retention & Treatment Adherence Plan; Prior Authorization Processes

**Administrative:** Assessment of fibrosis level; Test patient for HBV; Determine presence of cirrhosis and/or liver cancer

**Resources:** Providers who can stage and are trained; Identification of Treatment Options & Provider; Patient Assistance Programs; Peer Support; Sobriety, Relapse prevention, and safety planning

**Knowledge:** Insurance navigation; Costs; Disease Literacy; Medication Education; Obtain approvals on Prior Authorization
## Integration Components: Linkage to Cure

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<tr>
<th>Undx</th>
<th>Dx</th>
<th>Staging</th>
<th>Tx</th>
<th>Cure</th>
<th>Wellness</th>
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### Treat, Adhere and Cure

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<tr>
<th>System:</th>
<th>Follow-Up system for post-treatment viral load/cure; Ongoing patient follow-up</th>
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<tbody>
<tr>
<td>Admin:</td>
<td>Medication refill monitoring; Ongoing surveillance with advanced stage disease; Laboratory schedule for monitoring of viral load</td>
</tr>
<tr>
<td>Resources:</td>
<td>Specialty Pharmacy; Peer Support</td>
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<tr>
<td>Knowledge:</td>
<td>Adherence &amp; Medication Education</td>
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Integration Components: **Wellness & Advocacy**

- **Cured. Wellness. Advocacy**

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<th>System:</th>
<th>Liver cancer prevention &amp; surveillance</th>
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<td>Resources:</td>
<td>Opportunities for engagement in social justice, advocacy and support; Story sharing</td>
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<tr>
<td>Knowledge:</td>
<td>Supporting patients with new ‘cured’ identity; Prevention of re-infection</td>
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Resources

• Caring Ambassadors Program & Syndemic Roundtable Program
• National Viral Hepatitis Roundtable
• HCV Advocate
• The Hepatitis C Mentor & Support Group, Inc. (HCMSG)
• Immunization Action Coalition
• CDC
• Project ECHO
• National Viral Hepatitis Action Plan
• Hepatitis C: State of Medicaid Access
• ATTC – HCV Current