Hepatitis Update

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Bureau of Communicable Diseases
Surveillance & Epidemiological Update
# Viral Hepatitis Program Funding

<table>
<thead>
<tr>
<th>Centers for Disease Control &amp; Prevention</th>
<th>Florida Funding GY 2016</th>
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<tbody>
<tr>
<td>Prevention</td>
<td>$97,462</td>
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<tr>
<td>Surveillance</td>
<td>$189,016</td>
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<td><strong>TOTAL</strong></td>
<td><strong>$286,478</strong></td>
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<th>State Funding</th>
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<tbody>
<tr>
<td>Prevention &amp; Surveillance</td>
<td>$1,333,066</td>
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- HIV funding to support increased testing, rapid hepatitis C testing, confirmatory testing and medications for co-infected individuals on ADAP.
- Immunization funding to provide hepatitis A and B vaccine through county health departments.
Viral Hepatitis Program Structure

• Four Staff in Tallahassee
  • Program Manager
  • Field Services Coordinator
  • Health Educator
  • Surveillance Coordinator

• Support for County Health Departments
  • Hepatitis A & B vaccines provided to all 67 CHDs
  • Chronic hepatitis testing provided through Department public health laboratories
  • Printed educational materials

• Two CHDs funded for specific hepatitis surveillance activities
*Change to F.A.C. 34D-3 Reporting requirements for hepatitis.
Status of Acute Hepatitis B

• Steady increase of reported acute hepatitis B cases
  • 2010, n = 315; 2016, n = 710
• 2016 acute hepatitis B by age
  • 40 – 49 years, n = 215
  • 30 – 39 years, n = 189
  • 50 – 59 years, n = 161
• 2016 acute hepatitis B by race
  • White, n = 529
  • Black, n = 76
• 2016 acute hepatitis B by gender
  • Male, n = 440
  • Female, n = 269
Status of Acute Hepatitis C

- Steady increase of reported acute hepatitis C cases
  - 2010, n = 105; 2016, n = 301
- 2016 acute hepatitis C by age
  - 20 – 29 years, n = 100
  - 30 – 39 years, n = 79
  - 40 – 49 years, n = 49
- 2016 acute hepatitis C by race
  - White, n = 251
  - Black, n = 16
- 2016 acute hepatitis C by gender
  - Male, n = 163
  - Female, n = 138
Chronic Hepatitis in Florida, 2010-2016

*Change to F.A.C. 34D-3 Reporting requirements for hepatitis.
Status of Chronic Hepatitis B - 2016

Gradual increase of reported chronic hepatitis B cases

- 2010, n = 4,265
- 2016, n = 5,007

- Age
  - 30 – 39 years, n = 1,117
  - > 60 years, n = 1,086
  - 50 – 59 years, n = 1,064

- Race
  - White, n = 1,014
  - Black, n = 653
  - Unknown, n = 2,900

- Gender
  - Male, n = 2,795
  - Female, n = 2,161
Status of Chronic Hepatitis C - 2016

Steady increase of reported chronic hepatitis C cases

- 2010, n = 15,448;
- 2016, n = 29,558

- Age
  - 50 – 59 years, n= 7,012
  - > 60 years, n = 6,887
  - 30 – 39 years, n = 5,941

- Race
  - White, n = 10,943
  - Black, n = 1,591
  - Unknown, n = 15,886

- Gender
  - Male, n = 17,278
  - Female, n = 12,070
Treatment for Hepatitis C

- There are no public health funds allocated to pay for treatment for persons who are mono-infected with HCV
- Treatment provided free of charge to patients who are co-infected with HIV and eligible for the AIDS Drug Assistance Program
- Florida Medicaid covers HCV treatment, including physician costs and laboratory tests
  - They require a negative drug screening within 30 days of requesting the authorization
- Persons infected with HCV are eligible for free vaccinations for hepatitis A and B
Treatment for Hepatitis C

• Some of the larger metropolitan areas (Tampa, Palm Beach, Ft. Lauderdale) have special taxing districts that provide medical coverage to low-income persons. HCV treatment is covered by these plans.

• Some local health department physicians are prescribing HCV medication and assisting clients in applying to pharmaceutical companies’ patient assistance programs. If possible, they are charging the clients for the necessary laboratory tests or covering the costs through local county funds.
Priority Areas

• Priorities for Hepatitis are Shifting
  • Past programs focused heavily on educational materials, screening and vaccination
  • Current funding emphasizes targeted screening and linkage to care for those who test positive
    • Outreach to high risk populations
  • Need to interview or investigate acute cases of hepatitis B and hepatitis C
Introduction to New Strategic Priority Areas
Overview of the Hepatitis Program

**Vision**
Eliminate viral hepatitis in Florida.

**Mission**
Prevent the transmission of viral hepatitis.

**Strategic Priorities**
- Improve detection
- Link patients to care
- Minimize health disparities
- Strengthen hepatitis surveillance

**Key Drivers**
- Organizational standards
- Florida public health standards
- Community needs and local context
How did we determine these priorities?

1. Review of national and state hepatitis strategic plans

2. Brainstorming based upon the best practices found in these plans and the conditions under which DOH operates

3. Alignment to the program’s Situational Analysis and Surveillance grants funded through the CDC