Hepatitis Awareness Information

Hepatitis is an inflammation of the liver caused by a virus; the most common types are hepatitis A virus (HAV), hepatitis B virus (HBV) and hepatitis C virus (HCV);

Hepatitis does not discriminate; it affects all age groups, genders, races, ethnicities and income brackets;

Some persons who are infected with HAV, many persons who are infected with HBV and most persons who are infected with HCV do NOT have symptoms;

Hepatitis public health focuses on awareness, education, and tools for making healthy choices; conducting disease surveillance; eliminating vaccine-preventable hepatitis; facilitating screening, testing and early detection; integrating hepatitis prevention and care into existing services; and, supporting access to care and early treatment;

Education and eliminating risk factors are key to public health prevention and need to target: physicians (especially primary care); nurses; physician extenders; health professionals; first responders; teachers; middle, high school and college students; youth; parents; pregnant women; middle-aged at risk adults; food handlers; persons who had a blood transfusion before 1992; foreign born; homeless people; and inmates;

HAV and HBV are two of the most prevalent vaccine-preventable diseases, yet not all people who are at high-risk and/or who are in the recommended groups for vaccination are vaccinated.

There is no vaccine for HCV; therefore, prevention, early detection and prompt treatment are critical;

90% of infants and 30% of children <5 years old who acquire HBV infection become chronically infected and 25% of those die prematurely of liver cancer or cirrhosis;

There are State mandates that all newborns (>2000 grams at birth), infants and school-age children/youth in Connecticut be vaccinated against HBV; and, vaccination is also strongly recommended for high-risk adults and persons traveling to areas with high endemic rates of HBV;

Based on the Center for Disease Control and Prevention (CDC) estimates, there are at least 60,000 persons in Connecticut with chronic HCV. The DPH has an active surveillance system with mandatory reporting requirements; however, we still face the challenge of at least 25,000 undiagnosed chronic HCV persons in Connecticut, access to care and timely and affordable treatment;

Of those infected with HCV, 80-85% will develop a chronic infection, and 20% of those will progress to serious health complications, liver cancer, require a liver transplantation and may even die;

HCV mortality rates are projected to triple by 2010. Currently 8,000 to 10,000 people die annually in the U.S., by 2010 special studies indicate that 30,000 people will die annually from HCV in the U.S.;

According to the CDC, by 2008, the number of people with HCV people with decompensated liver disease will increase 279%, liver-related deaths increase 223% and the need for liver transplantation increase 528%.

HCV accounts for 40% of liver cancer, is the most common cause of chronic liver disease in the United States, and is the leading cause of liver transplantation; also 40% of people with genotype 1 HCV have diabetes;

There are 20,000 people in the U.S. waiting for a liver transplant and only about 4,900 livers available each year with a Northeast regional average cost of $350,000 for immediate hospital and doctor expenses indicating that hepatitis C prevention, testing and treatment should be considered as cost-effective public policies;

One quarter to one third of HIV-infected persons in the United States are also infected with HCV and liver failure from HCV has become a leading cause of death for people who are co-infected and living with HIV;

Total costs of HCV annually are $489 million; cost of medical care and lost wages due to HCV is $658 million; direct medical costs of HCV is $750 million/year; total medical expenditures for people with hepatitis is $15 billion per year; employer costs for absentee losses due to hepatitis C is $4 to $8 billion per year; medical costs and lost wages as the result of HBV annually is $658 million; cost of premature disability and death projected from 2010 to 2019 if inaction continues related to HCV is $75.5 billion.

It is fitting to support the goals of our statewide viral hepatitis public health prevention strategies and this observance of Viral Hepatitis Awareness Month to promote education, awareness, screening, testing, treatment and vaccination as appropriate.