

Hepatitis C Initiatives

American Correctional Association

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Overview of Hepatitis C and Corrections

- Disease is over-represented in the criminal justice system
- As many as one-third of those with HCV spend part of every year in correctional setting
- Prevalence estimates range from 9% to 48%
- Significant cost, logistical and resource challenges for corrections to immediately provide direct acting antivirals to all patients

Sources: Varan, et.al.; Hepatitis C Seroprevalence Among Prison Inmates Since 2001: Still High, but Declining; Public Health Reports, 2014: 129: 187–195; Edlin, et.al., Toward a more accurate estimate of the prevalence of hepatitis in the United States, Hepatology, 2015 November 62(5): 1353–1363; Larney, et.al., Epidemiology of Hepatitis C Virus in Pennsylvania State Prison 2004–2012: Limitations of 1945-1965 Birth Cohort Screening in Correctional Settings; AJPubHealth, April, 2014.



The Changing Landscape: Hepatitis C Treatment in Corrections

(2014)

 Special Session and Breakfast – 144th Congress of Correction, Salt Lake City

Panelists

- David Wyles, MD Associate Professor of Medicine, Division of Infectious Diseases, University of California, San Diego
- James Greer, RN, MSN Director, Bureau of Health Services, Wisconsin Department of Corrections
- Lannette Linthicum, MD, FACP Director of Health Services Division, Texas Department of Criminal Justice
- James Welch, RN, HNB-BC Division Director, Delaware Department of Corrections

Goal of Session:

- Provide a better understanding of HCV emerging therapies and cost effective disease management
- ACA was simultaneously beginning a HCV Survey Project



HCV Survey Project (2014)

- ACA Study Data collected Summer 2014
- Online Survey Questionnaire
- Included 50 states systems, the Federal Bureau of Prisons, and 6 large jails systems
 - Miami Dade County
 - Philadelphia
 - LA County
 - Cook County
 - New York City

The survey covered six key areas of correctional health care

- Policy and clinical treatment guidance
- Prevalence
- Current treatment
- Prevention and inmate patient education strategies
- Cost of current treatment
- Future cost estimates





53 of the 57 distributed surveys responded (93% return rate) 2

49 surveys had responses to every question

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41 surveys came from a state prison system, 3 surveys came from a jail system, and 7 surveys were from a unified system

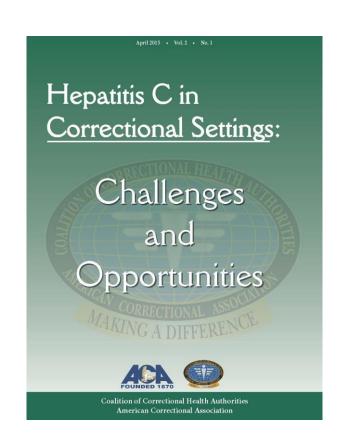
HCV Survey Project - Results

Hepatitis C in Correctional Settings: Challenges and Opportunities

(2015)

• Information collected from the 2014 ACA Survey was compiled and published into a monograph

• Six recommendations resulted from the survey







Determine the true prevalence of hepatitis C viral infection in the U.S. correctional settings



Practice consistency in screening and clinical practice across the nation



Practice posttreatment relapse prevention



Support financial needs for hepatitis C viral infection research and treatment



Support research to identify appropriate candidates for treatment and treatment protocols



Develop targeted community and correctional linkages to improve continuity of care and patient outcomes

Recommendations

Hepatitis C Treatment "Game Changing"

(2016)

- Health Care Special Session and Luncheon
 - 146th Congress of Correction, Boston

Session Focus

- HCV National Policy
- Advocacy
- Legal perspective on treating offenders with HCV

Health Care Special Session and Luncheon

Hepatitis C Treatment "Game Changing"

A National Perspective

Carmel Shachar, J.D., MPH

Saturday, Aug. 6 12:30 - 1:45 p.m.

Location: Ballroom A, Level 3

John B. Hynes Veterans Memorial

Convention Center

In the last several years, the U.S. Food and Drug Administration (FDA) approved a new generation of direct-acting antiviral (DAA) oral medications that has revolutionized the landscape for hepatitis C virus (HCV) treatment. Therapy with DAAs has been markedly more effective than older therapies, easier to tolerate and highly effective, even in traditionally more difficult-to-treat patients.

The revolutionary new treatments of HCV, which disproportionately affect the correctional population and is the number-one infections disease killer in America, is an opportunity to improve public and individual health by treating this epidemic in the correctional population. Enthusiasm for these new therapies to treat the correctional population, however, has been tempered by the challenges that correctional agencies face to drug access and reimbursement, given the high costs of the DAA medications.

Carmel Shachar, J.D., MPH, will explore with the audience HCV national policy, advocacy, legal impact/perspective on treating offenders for HCV, and offender access to the new treatment therapies. She will apply the challenges facing correctional agencies in the context of the national conversation regarding drug access and cost, as well as discuss potential responses by the correctional community.

Carmel joined the Harvard Law School Center for Health Law and Policy Innovation in September 2014. She leads the Center's Affordable Care Act implementation, access to care, health care data and Supreme Court projects. Camel provides technical assistance to many state and national HCV coalitions, including the National Viral Hepatitis Roundtable and coalitions in Louisiana, Alabama, Illinois and Oregon. She heads the Qualified Health Plan Assessment Project, examining access to HCV and HIV medications on the Marketplaces of 18 states.



This luncheon was made possible by an unrestricted educational grant by MHM Correctional Services Inc. & Centurion LLC.



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Hepatitis C: Unprecedented Policy, Legal and Budget Challenges for Corrections

(2016)

- Training session conducted at the Annual Correctional Health Authorities Symposium
 - Health care administrators from the 50 states
 - 4 largest jail systems
 - Federal Bureau of Prisons
 - District of Columbia.
- Session focus was on legal impact of the new therapeutics for Hepatitis C Virus infection
- Expert Panelists from:
 - American Civil Liberties Union
 - · Harvard Law School
 - Gilead Sciences, Inc.



Advancing The Cure

(2016)

- Primary Goal
 - Provide correctional health professionals and inmates population with a better understanding of HCV emerging therapies and disease management strategies
- Correctional Professionals Education Program
- Inmate Education Program



Advancing The Cure: Hepatitis C Educational Program for Correctional Professionals

This program was focused on educating correctional health professionals on evolving science and medication innovations in the management of HCV

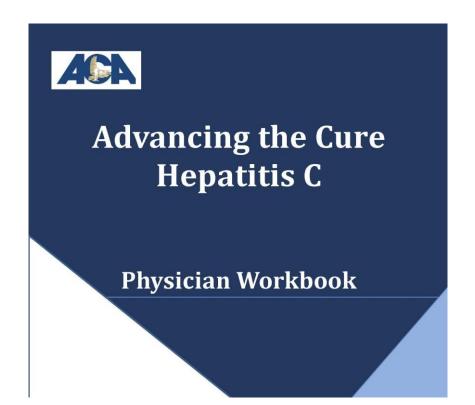
Nurses Training Modules

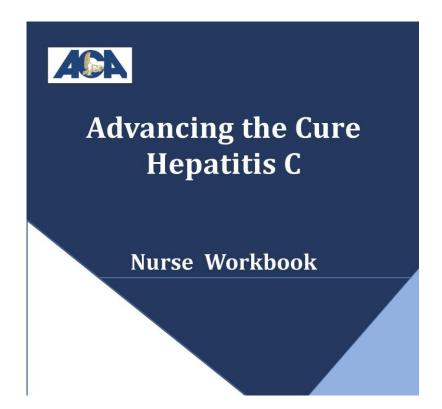
- 1. Virology and Epidemiology of Hepatitis C Virus Infection
- 2. Transmission and Symptoms
- 3. Screening and Testing of HCV Infection
- 4. Chronic HCV Testing and Management
- 5. Patient Counseling
- 6. Offender Education Program & Re-entry

Physician Training Modules

- Epidemiology of HCV Infection
- 2. Natural History of HCV Infection
- 3. Diagnosis of HCV Infection
- 4. Evaluation of Inmates with HCV Infection
- 5. Treatment of HCV Infection
- 6. Case Studies
- 7. Reentry







Training Materials

Advancing The Cure On-Site Trainings

(2017-2018)

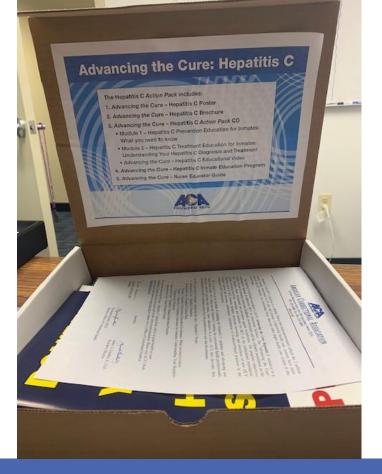
- Nine HCV: Advancing The Cure Trainings
 - · Alexandria, Virginia (Twice)
 - Baton Rouge, Louisiana
 - Denver, Colorado
 - · Kansas City, Missouri
 - Oklahoma City, Oklahoma
 - · Orlando, Florida
 - Harrisburg, Pennsylvania
 - · Forsyth, Georgia
- One physician training and one nurse training conducted at each site.
 - · 8 hours each
 - Continuing education offered at both



Advancing The Cure: Hepatitis C Educational Program for Inmates

- Inmate Education Action Pack
 - Sent to 50 state correctional agencies, 4 largest jail systems, Federal Bureau of Prisons, and ACA accredited jails
 - Contents
 - Posters
 - Video
 - Brochures/Pamphlets
 - Nurse Educator Guide
 - Inmate Education Program
- The Inmate Education Program focused on health education and disease prevention before and after treatment





Hepatitis C Testing

Hepatitis C infection is usually asymptomatic – meaning, people have no symptoms at all. If people do have symptoms, they are often very short lived and mild-kind of like the stomach flu. In the United States approximately 2.7-3.9 million people are infected with HCV. About half the people who are infected with HCV have never been tested because they do not feel sick.

Who should get tested?

- Anyone born during 1945-1965 (Baby-Boomer)
- Anyone who has shared needles, syringes and other drug related equipment(cookers, cotton, straws)-even just once
- Anyone who received blood products or an organ transplant before 1992
- Anyone who has had sexual intercourse if blood was exchanged
- Anyone who has had tattoos and piercings from improperly sanitized equipment
- Current or former injection drug users
- Anyone who has shared personal items-razors, toothbrushes
- · Infants born to HCV infected mothers

Protecting Your Liver:

There are many ways to keep your liver healthy when you have HCV.

- · Eat a well-balanced diet
- · Maintain a healthy weight
- Limit your use of alcohol
- Limit your use of acetaminophen, supplements and iron

If you can't get treated for HCV while you are incarcerated

- Attend all sick call appointments for laboratory tests and follow-up
- Follow up with a liver specialist when you are released from incarceration

Hepatitis C Can be Cured. But you can get re-infected if you do not live a healthy lifestyle after treatment



For more information ask your nurse about Hepatitis C

HEPATITIS C...KNOW THE FACTS

What is Hepatitis C?

Hepatitis C is a disease caused by the Hepatitis C Virus (HCV). This virus affects your liver.

■ How Do I Get Hepatitis C?

Hepatitis C is mainly spread through contact with blood of an infected person

- Sharing needles, syringes and other drug related equipment
- Receiving organ transplants or blood products before 1992
- Sexual intercourse if blood is exchanged
- Tattoos and piercings from improperly sanitized equipment
- · Current or former injection drug users
- Sharing personal items-razors, toothbrushes
- Infants born to infected mothers

■ Most Common Ways Hepatitis C is spread?

Sharing of contaminated needles, syringes, and other injection drug equipment

■ What are ways Hepatitis C is not spread?

- Holding hands
- Hugging or kissing
- Sharing eating or drinking utensils
- Sharing a room with someone
- Sharing food
- Donating blood

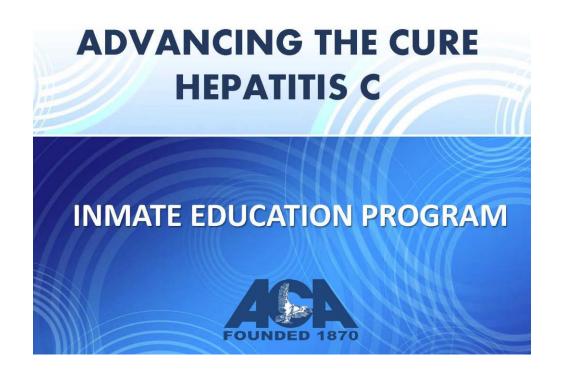
■ Is Hepatitis C Curable?

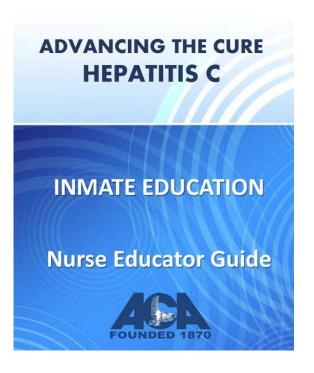
Yes, Hepatitis C is curable. With new medication called Direct Acting Antivirals (DAAs), Hepatitis C has a cure rate of 96%. Cure means you no longer have the HCV in your blood after you have been treated.

■ Is There a Vaccine for Hepatitis C?

There is no Hepatitis C vaccine.

HCV Action Pack





Inmate Education Program

Hepatitis C & Corrections – Treatment Costs Strategies and System Implementation

(2018)

- Training session conducted at the Annual Correctional Health Authorities Symposium
 - Health care administrators from the 50 states
 - 4 largest jail systems
 - Federal Bureau of Prisons
 - District of Columbia
- Session focus was on cost effective management strategies in implementing a HCV treatment program
- Experts from:
 - U.S. Department of Health and Human Services
 - University of Texas Medical Branch
 - Veterans Health Administration



Hepatitis C & Corrections – Treatment Costs Strategies and System Implementation

(2018)

The two part session included approaches from

- Veteran Affairs HCV program
- Federal task force addressing reentry initiatives in managing HCV
- A university model's diagnostic and treatment programs
- Three state agency DOCs outlining effective HCV screening, diagnostic and treatment programs in coordination with internal and external stakeholders
 - Wisconsin Department of Corrections
 - Virginia Department of Corrections
 - Colorado Department of Corrections



Advancing The Cure (cont.)

(2019)

• Continuation of the HCV: Advancing The Cure program

 ACA will conduct six additional regional trainings for correctional physicians and nurses

• The curriculum for both trainings will be updated and reproduced



HCV Survey Project (cont.)

2019

- ACA is also in the process of conducting a follow-up survey to the 2014 HCV Survey
 - Compare HCV treatment protocols
 - Use of new DAA drugs
 - Fiscal management of HCV treatment programs



Contact Information

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