# Living with Hepatitis B: Cultural Barriers, Stigma, and Institutional Discrimination

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February 24, 2015

# "The arc of the moral universe is long, but it bends towards justice." Martin Luther King, Jr.

- **2010-11** Civil rights advocates challenged a healthcare school's policy to exclude an individual with chronic HBV and settled on favorable terms.
- 2011-12 HBV medical and research advocates met with the CDC, because guidelines for healthcare workers with chronic HBV infection had not been updated CDC since 1991. In July, 2012, the CDC published "Updated Recommendations for the Management of Hepatitis B Virus-Infected Health-Care Providers and Students" (www.cdc.gov/mmwr/PDF/rr/rr6103.pdf).
- 2011-13 Civil rights and HBV medical advocates assisted medical and dental students who were threatened with dismissal or were accepted but not allowed to enroll in professional healthcare programs due to chronic HBV infection. Advocates filed the initial complaint with the U.S. Dept. of Justice (DOJ) regarding exclusion of an HBV-infected student by a New Jersey medical school.

In March, 2013, the DOJ announced the DOJ-UMDNJ settlement agreement – the first-ever under the Americans with Disabilities Act (ADA) on behalf of persons with HBV (www.ada.gov/umdnj\_sa.htm), which was followed by a Technical Assistance Letter jointly signed and sent to all healthcare professional schools by the DOJ, the Dept. of Health & Human Services, and the Dept. of Education.

## Our HBV civil rights advocacy continues . . .

Feb, 2015 New DOJ complaint filed: Applicants and students are being harmed by the failure of higher ed healthcare programs to uniformly disclose their HBV Policies.

### **School Policy Example 1 of 4**

Documentation of students' immunity to communicable diseases in order to protect the health of all patients, students, staff and employees for the University of \_\_\_\_\_\_\_ School of Medicine. This is in accordance with \_\_\_\_\_\_ State Law -- Public Act 89-90, federal OSHA mandatory standard and Centers for Disease Control and Prevention (CDC) Guidelines.

Type of documentation required are:

. . .

Hepatitis B (HB) immunity for those with potential exposure to blood and body fluids by:

- a. Three doses of HB vaccine in the past AND a positive titer after at least one month from the third vaccine dose OR
- b. Documentation of positive HB antibody titer in the past.

### **School Policy Example 2 of 4**

Immunization Requirements Form for Incoming Medical Students

All medical students must provide proof of immunization prior to registration. Students who do not provide \_\_\_\_\_ with documentation of the required immunizations will not be allowed to start school.

All medical students are required to obtain the following immunizations prior to matriculation:

. . .

- Hepatitis B (series of three)
- Hepatitis B titer, positive result\*

. . .

\*Please note: for the Varicella titer, Hepatitis B titer... a copy of the lab results is required.

### **School Policy Example 3 of 4**

Immunization requirements (available through the university's Immunization Clinic)

. . .

Proof of Hepatitis B core antibody blood test, even if you have already completed the Hepatitis B vaccine series. If you have already completed the series, you will also need to have a quantitative Hepatitis B surface antibody laboratory test.

If an entering student's Hepatitis B core antibody is "positive," the following additional lab tests are mandatory: Hepatitis B surface antibody (HBsAb) and Hepatitis B surface antigen. If the HBsAb test comes back >10 mIU/mL, then the individual has cleared the infection. If the surface antigen blood test is positive, a Hepatitis B DNA blood test is required.

Individuals whose HBV DNA level is less than four logs (meaning  $10 \times 10 \times 10 \times 10 = 10,000 \text{ IU/mL}$  or copies/mL) will be allowed to enroll and matriculate through the program with certain conditions established by an expert review panel. The student must sign a contract delineating specific requirements regarding their performance in the clinical setting and must consent to an HBV DNA lab test every four months (at the student's expense).

Individuals whose HBV DNA level is greater than four logs (meaning equal to or higher than 10,001 IU/mL or copies/mL) will be allowed to enroll and matriculate through the program but with certain conditions as established by an expert review panel. The student must sign a contract delineating specific requirements regarding their performance in the clinical setting and must consent to an HBV DNA lab test every four months (at the student's expense).

### **School Policy Example 4 of 4**

. . . I am writing to inform you of important student health . . . matters. . . .

Last, but not least, you will be required to comply with the University's student immunization policy prior to beginning classes in August. . . . These requirements are as follows:

6. Hepatitis B: You must show that you are immune from Hepatitis B and not already infectious with Hepatitis B. Please provide documentation that you have had the series of three vaccinations against Hepatitis B. The first two vaccinations should be given one month apart.

The third vaccination must be given at least 4 months after the first dose, and at least 2 months after the second dose. If you have not completed the series of vaccinations, the Student Health Service will be prepared to administer the series. You will be charged for the cost of these immunizations. You are also required to have serologic proof of immunity by obtaining a quantitative Hepatitis B Surface Antibody test. This should be performed at least 1 month after the last Hepatitis B immunization.

In order to protect students and patients from potential exposure to Hepatitis B virus, students must have a Hepatitis B Surface Antigen test performed prior to matriculation. If the Hepatitis B Surface Antigen test is positive, a Hepatitis B core Antibody and Hepatitis B e Antigen test must be done. Additional testing may be required as deemed appropriate by the Student Health Service. If these tests indicated potential for transmission, an evaluation shall be made of the need for monitoring clinical performance and the scope of assigned or permitted clinical activities consistent with patient protection.

# and we persevere . . .

### 2014present

Current Dept. of Defense policy does not permit individuals or students with chronic HBV to enter military service or participate in military scholarship programs. In 2013 the U.S. Army discharged from active duty a 9-year veteran who served in Afghanistan and Iraq. Advocates are working with congressional representatives and the administration to have the Dept. of Defense update its policies for personnel with chronic HBV. The use of outdated scientific information to exclude or remove persons with chronic HBV from active military service is unfair and should not continue.

To join or support this advocacy, please contact Hep B United or email nadine.shiroma@gmail.com

because the fight for rights is a fight for recognition -- for the 2 million Americans living with HBV disease, stigma and discrimination.