



# FEDERAL-COMMUNITY PARTNERSHIP TO ELIMINATE HEPATITIS B

**Hep B United Summit 2018**

**#HepBUnite**



# Hep B United Goals

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**Awareness:** Raise the profile of hepatitis B and liver cancer as an urgent public health priority.

**Prevention:** Increase hepatitis B testing and vaccination, particularly among Asian Americans, Pacific Islanders and other high-risk communities.

**Intervention:** Improve access to care and treatment for individuals living with hepatitis B to prevent end-stage liver disease and liver cancer.



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# Strategic Priority: Prevention and Testing

## Hep B United

- Reduce/eliminate new cases of hepatitis B
- Promote and provide information to at-risk persons, patients, health care workers, and the general public to increase testing

## NASEM

- CDC should work with states to identify settings appropriate for enhanced viral hepatitis testing based on expected prevalence.
- CDC should support cross-sectional and cohort studies to measure HBV and HCV infection incidence and prevalence in high-risk populations.
- States should expand access to adult hepatitis B vaccination, removing barriers to free immunization in pharmacies and other easily accessible settings.
- States and federal agencies should expand access to syringe exchange and opioid agonist therapy in accessible venues.
- The National Committee for Quality Assurance should establish measures to monitor compliance with viral hepatitis screening guidelines and hepatitis B vaccine birth dose coverage and include the new measures in the Healthcare Effectiveness Data and Information Set.



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# Strategic Priority: Perinatal Hepatitis B Transmission

## Hep B United

- Eliminate perinatal hepatitis B transmission through expanding partnerships with state and local level perinatal hepatitis B prevention coordinators, increasing education and awareness among health care providers and HBV-infected women, promoting the universal birth dose, and providing appropriate case management for infected pregnant women.

## NASEM

- CDC, AASLD, IDA, and ACOG should recommend that all HBsAg+ pregnant women have early prenatal HBV DNA and liver enzyme tests to evaluate whether antiviral therapy is indicated for prophylaxis to eliminate mother-to-child transmission or treatment of chronic active hepatitis.
- The National Committee for Quality Assurance should establish measures to monitor compliance with viral hepatitis screening guidelines and hepatitis B vaccine birth dose coverage and include the new measures in the Healthcare Effectiveness Data and Information Set.

# Strategic Priority: Linkage to Care

## Hep B United

- Develop community- and clinic-based infrastructure to improve patient navigation to increase the capacity of community coalitions to identify, counsel, vaccinate susceptible individuals, and care for individuals living with hepatitis B to limit the progression of liver damage and liver cancer.

## NASEM

- The Department of Health and Human Services should work with states to build a comprehensive system of care and support for special populations with hepatitis B and C on the scale of the Ryan White system.



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# Strategic Priority: Liver Cancer Prevention and Early Detection

## Hep B United

- Reduce the incidence of hepatitis B-related liver complications including hepatocellular carcinoma (HCC), cirrhosis, and liver failure through screening, early detection, and treatment.

## NASEM

- CDC, in partnership with state and local health departments, should support standard hepatitis case finding measures and the follow-up and monitoring of all viral hepatitis cases reported through public health surveillance. CDC should work with the NCI to attach viral etiology to reports of liver cancer in its periodic national reports on cancer.



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# Strategic Priority: Surveillance

## Hep B United

- Promote, advocate for, and contribute to national hepatitis B data, to monitor disease trends, assess the burden of hepatitis B and liver cancer in highly impacted communities, and evaluate programmatic impact.

## NASEM

- CDC, in partnership with state and local health departments, should support standard hepatitis case finding measures and the follow-up and monitoring of all viral hepatitis cases reported through public health surveillance. CDC should work with the NCI to attach viral etiology to reports of liver cancer in its periodic national reports on cancer.