

United States Senate

WASHINGTON, DC 20510

April 13, 2018

The Honorable Roy Blunt
Chairman
Senate Appropriations Subcommittee
on Labor, Health and Human Services,
Education and Related Agencies
Washington, DC 20510

The Honorable Patty Murray
Ranking Member
Senate Appropriations Subcommittee
on Labor, Health and Human Services,
Education and Related Agencies
Washington, DC 20510

Dear Chairman Blunt and Ranking Member Murray:

As you begin deliberations on the Fiscal Year 2019 Labor, Health and Human Services, Education, and Related Agencies Appropriations bill, we respectfully request that you increase funds for the Division of Viral Hepatitis (DVH) at the Centers for Disease Control and Prevention (CDC) to \$134 million, an increase of \$95 million over the FY2018 enacted level.

Approximately 5.3 million people in the United States are affected by hepatitis, with 50 to 65 percent unaware they are living with such infection. Increased financial support for DVH will allow the CDC to stem the tide of increasing infections due to the current opioid epidemic, as well as make progress on addressing mother-to-child transmission and reducing hepatitis-linked mortality.

Link between Opioid Crisis and Hepatitis

Between 2010 and 2014, new hepatitis C (HCV) infections have increased by over 200 percent and hepatitis B (HBV) infections have also increased, undoing progress the nation has made towards curbing disease transmissions. Experts attribute these spikes to increased injection drug use associated with the ongoing opioid epidemic. The nation's infectious disease public health infrastructure is an underutilized resource in our collective response to the opioid epidemic.

Additional funding would allow DVH to further invest in important activities that could help curb one of the impacts of the opioid epidemic. Such activities include expanded hepatitis testing, linkages to hepatitis and substance use treatment for injection drug users, community and provider education, and hepatitis surveillance infrastructure.

Addressing Mother-to-Child Transmission of Hepatitis:

Approximately 24,000 infants are born to mothers living with HBV, resulting in as many as 1,000 perinatal transmissions per year. In addition, CDC has reported an increased risk of mother-to-child transmission of HCV. Elimination of mother-to-child transmission is an attainable goal, particularly if sufficient funding for DVH is sustained. For example, a robust investment this year would allow DVH to continue to work with state epidemiologists to implement revised state and local reporting criteria for pregnant women and their newborns living with hepatitis. DVH could also consider routine HCV testing for women of child-bearing age to identify pregnant women who would benefit from treatment, and to provide preventive services to their newborns.

Reducing HBV and HCV-Related Mortality

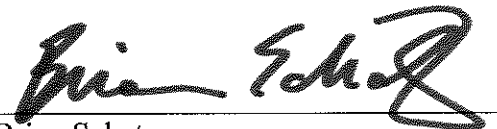
As noted by the CDC, viral hepatitis mortality rates have increased substantially in the United States over the past decade. HBV and HCV remain the leading causes of liver cancer – one of the most lethal, most expensive to battle, and fastest growing cancers in America. In fact, deaths associated with HCV now surpass deaths associated with all 59 other notifiable infectious diseases combined. No community is exempt from the impact of HBV and HCV. Rising rates of new transmissions and high rates of chronic infection disproportionately impact racial and ethnic populations including Asian Americans and American Indian/Alaska Native communities and contribute to public health inequity. Meanwhile, the “baby boomer” population currently accounts for three out of every four cases of chronic HCV. As these Americans continue to age, they are likely to develop complications from HCV and require costly medical interventions that can be avoided if they are tested earlier and provided with curative treatment options.

We appreciate the Committee’s commitment to combating the opioid epidemic and for its support for viral hepatitis prevention. HBV is preventable through vaccination and HCV is curable. It is critical that the Viral Hepatitis program at CDC is fully funded in order to end the hepatitis epidemics in the United States. Making this investment in DVH is a key component in addressing a vital public health inequity and will strengthen our public health infrastructure as well as combat the devastating and expensive complications caused by viral hepatitis.

Sincerely,



Mazie K. Hirono
United States Senator



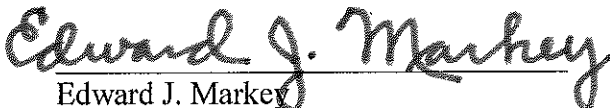
Brian Schatz
United States Senator



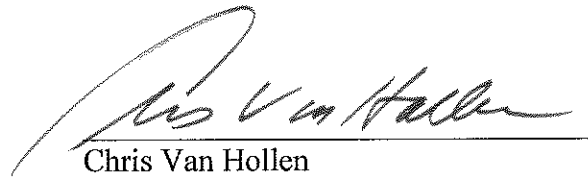
Martin Heinrich
United States Senator



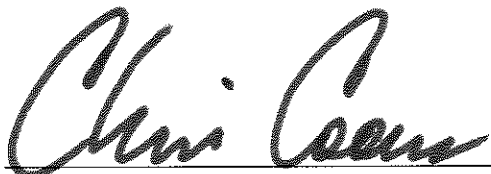
Sherrod Brown
United States Senator



Edward J. Markey
United States Senator



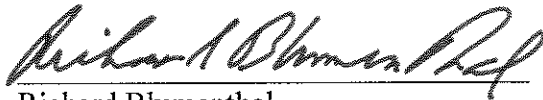
Chris Van Hollen
United States Senator



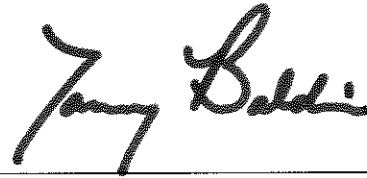
Christopher A. Coons
United States Senator



Kirsten Gillibrand
United States Senator



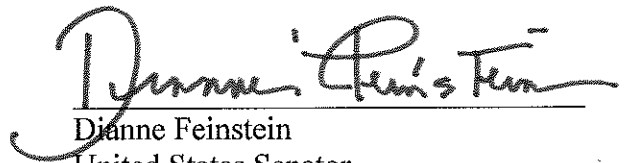
Richard Blumenthal
United States Senator



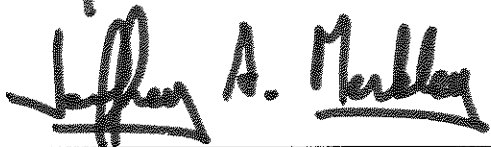
Tammy Baldwin
United States Senator



Elizabeth Warren
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Dianne Feinstein
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United States Senator



Benjamin L. Cardin
United States Senator