The Opioid Epidemic and Hepatitis C: a Public Health Crisis

Judith Feinberg, M.D.
Professor of Medicine/Infectious Diseases
Professor of Behavioral Medicine and Psychiatry
West Virginia University School of Medicine
Vice Chair, HIV Medicine Association
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Welcome To
WEST VIRGINIA
Wild and Wonderful
Reported number of Acute Hepatitis Cases
United States, 2000-2015

Source: CDC, National Notifiable Diseases Surveillance System (NNDSS)
Figure 4.2. Incidence of acute hepatitis C, by age group — United States, 2000–2015

Source: CDC, National Notifiable Diseases Surveillance System (NNDSS)

https://www.cdc.gov/drugoverdose/data/statedeaths.html
Persistence of Hepatitis C Viral Infectivity

- up to 63 days in syringe barrel and dead space
- up to 21 days in water from a plastic container
- up to 14 days on inanimate surfaces (cookers)
- up to 24 hours in filter, and
  and 48 hours when foil-wrapped.

- HCV-contaminated solution needs to be heated for almost a 90 seconds and reach temperatures of 144 degrees Fahrenheit for infectivity to be at undetectable levels.

Hepatitis C is on every piece of injecting equipment.

- alcohol swabs
- filters
- cookers
- surfaces
- rinse/mixing water
- bloody fingers
- syringes
- fingers in cookers
- fishing for a vein

Doerrbecker et al. Inactivation and survival of hepatitis C virus on inanimate surfaces. JID, 2011
Chronic HCV is #1 reason for liver transplantation in the U.S.

Current Barriers to Hepatitis C Treatment in West Virginia

• prior authorization by insurer
• WV Medicaid requirements
  • fibrosis (scarring in liver) ≥ F2
  • abstinent ≥ 3 months
  • specialist consultation required
• rural population with difficult access to specialists in cities
• primary care providers who lack knowledge, experience to diagnose, evaluate and treat hep C
Current Barriers: An epidemic of epidemics

- Hepatitis C (the leading infectious killer in the US)
- Hepatitis B
- HIV (here already)
- Overdoses
- Heart infection (endocarditis)
- Sexually Transmitted Infections
- Neonatal abstinence syndrome (babies born in withdrawal from maternal drug use)
- Children abandoned, neglected, abused, flooding foster care
- Homelessness
- First responder compassion fatigue/burnout
Recommendations

• address stigma
• expand substance abuse treatment
• enhance harm reduction services
  • accessible syringe services
  • ‘test-and-treat’ hepatitis C and HIV
  • pre-exposure prophylaxis for HIV
  • hepatitis B vaccination
• expand provider pool
  • hepatitis C ECHO (web-based training)
  • remove specialist requirement for prescribing
• remove requirement for liver damage (fibrosis)
• remove requirement for sobriety (requires accessible syringe services)