A New Strategy Identifies HCV in Unsuspecting Baby Boomers (Atlanta, Georgia)

Denise first heard about the hepatitis C virus (HCV) when her sister was diagnosed with HCV infection a few years back. Although at the time Denise worried about possibly being infected, once she discovered that HCV was not a communicable disease but rather transmitted via exposure to contaminated blood, her fears quickly subsided. After all, she could not recall ever having come into contact with potentially contaminated blood. It was not until fall of 2013 that 48-year-old Denise received the same news her sister had: she, too, was living with HCV infection.

Denise was having some bothersome symptoms, like tendonitis and fatigue, which brought her to Grady Memorial Hospital for some simple blood work. Unbeknownst to Denise, Grady was participating in a CDC demonstration project aimed at testing baby boomers for hepatitis C and linking those found infected to care and treatment. Because Denise was born between 1945-1965, she was routinely tested for HCV despite having considered herself at low risk for the infection. When she was told of her infection status, Denise was scared because she had very little knowledge about the disease. However, open communication with her doctor was comforting. Denise confided, “My doctor explained what was happening in my body and what was involved in treatment. I found out that [HCV infection] is curable, and now I know I’m going to be fine.”

Scheduled to begin HCV treatment in 2014, Denise heeded her physician’s advice to make valuable life changes to improve her health. She stopped using drugs and drinking alcohol, is eating better, and is prioritizing spiritual activities like attending church and reading her Bible. She is looking forward to a positive response to her HCV therapy, made possible by the CDC-Grady project. In the meantime, Denise has come to a “better place” both mentally and spiritually and is thankful to know her HCV-infection status.

- Hepatitis C is a serious viral infection that over time can cause liver damage, liver cancer, and even death. Early identification and treatment can prevent this damage, particularly with availability of new therapies that can lead to cure. Unfortunately, up to 3 in 4 people who are infected with hepatitis C virus (HCV) don’t know it, so they aren’t getting the necessary medical care and treatment. Anyone can get hepatitis C, but adults born from 1945 through 1965 are 5 times more likely to be living with this infection. The Centers for Disease Control and Prevention (CDC) has recommended that “baby-boomers,” persons born from 1945 through 1965, get tested for HCV and if positive for the virus be referred for care and treatment. CDC estimates the health benefits for such testing of baby boomers is comparable to other well accepted prevention services, including breast cancer screening and flu vaccination.

- A demonstration project is underway in Atlanta aimed at increasing the number of people aware of their HCV-infection status by screening baby-boomers seen in an urban teaching hospital for unrelated health-care problems. Funded by CDC’s Division of Viral Hepatitis, the project is being carried out at Grady Memorial Hospital, whose patient population consists of medically underserved patients, many of whom are African Americans and disproportionately affected by hepatitis C.
The hospital houses a primary-care center and the Grady Liver Clinic, which provides care to persons with hepatitis. Both facilities are staffed by faculty and internal medicine residents from Emory University. For the demonstration project, primary-care residents are responsible for implementing one-time HCV antibody testing for their patients born during 1945—1965. Patients found positive are then linked to care and treatment at the on-site clinic.

The residents are trained on how to screen their patients for hepatitis C, including email blasts with key literature and one-on-one follow-up training sessions. During the computer-based patient intake process, the residents receive a pop-up reminder asking whether the patient was born during 1945—1965. If so, the resident is prompted to order the HCV screening test. Once the lab results are in, project staff members promptly contact HCV-positive patients to set up a first care visit at the liver clinic, where patients are seen by patients are seen by a physician. In addition, HCV-positive patients are eligible for and encouraged to attend a monthly group education session.

With a modest investment of approximately $177,000 the first year, the program began testing in October 2012 and has already had promising findings. So far, there is an unexpectedly high prevalence of people testing positive for HCV (7.8%). As of September 2013, a total of 2,439 HCV blood tests have been performed, with 190 patients having a positive antibody test. To date, 149 of these patients have taken a follow-up blood test to determine whether they were currently infected; 104 of them (70%) tested positive for current HCV. Of HCV-positive patients, 96% attended the first treatment and care visit. Average age of these patients was 57 years; 61% were female, 80% were African-American, 50% were uninsured, and 44% were receiving government care.

This collaborative 2-year project demonstrates that HCV birth-cohort screening is both economically feasible and successful in an existing urban hospital with an underserved primary-care population. Residents and patients have willingly participated in the project, and the existing onsite liver clinic has facilitated linkage to care. Future directions for the project include expanding to other specialties/clinics and inpatient services within Grady as well as to other urban teaching hospitals serving similar populations at risk.

For more information on hepatitis C, please visit: www.cdc.gov/knowmorehepatitis