Hepatitis C: Proposed Expansion of Testing Recommendations, 2012



Hepatitis C is an unrecognized health crisis in the United States. This life-threatening infection affects an estimated 3.2 million Americans, most of whom are "baby boomers" (those born from 1945 through 1965). And while newly available treatments can cure the majority of hepatitis C cases, most people do not seek care because they do not know they are infected.

Diagnosing hepatitis C early is key, since the longer the virus goes undetected, the greater a person's risk of developing serious liver disease, including liver cancer and cirrhosis. Deaths due to hepatitis C are increasing, reaching more than 15,000 in 2007.

CDC's current public health recommendations focus on testing only individuals with known hepatitis C risk factors. To identify more hidden infections, provide prompt and appropriate care and treatment, and avoid tens of thousands of hepatitis C-related illnesses and deaths, CDC is proposing one-time hepatitis C testing for all baby boomers. The new draft recommendations will be available for public comment from May 22–June 8, 2012, and will be finalized later in the year.

Hepatitis C and Baby Boomers

More than 75 percent of American adults with hepatitis C are baby boomers



Baby boomers are five times more likely than other American adults to be infected with the disease. In fact, more than 75 percent of American adults with hepatitis C are baby boomers.

Many baby boomers were infected with hepatitis C when they were in their teens and twenties. Some may have become infected through blood transfusions or other health care exposures before universal precautions and widespread blood screening began in 1992. Others may have become infected from experimentation with drug use, even if only once decades ago. Because

these exposures were often long ago, many baby boomers may not recall — or may be unwilling to discuss — the events that could have placed them at risk. As a result, many have never been tested for hepatitis C.

Hepatitis C Testing: Proposed Expanded Recommendations

A blood test is the only way to identify these silent infections.

CDC currently recommends testing for those who have a known risk for hepatitis C (see box, this page). While this is still important, too many infections are being missed — since individuals, and even doctors, may be uncomfortable discussing behaviors related to hepatitis C risk. In addition, standard, routine tests of liver function miss more than half of all cases of hepatitis C infection.

As a result, CDC is proposing an expansion of its current risk-based guidelines to include a simple, one-time blood test for all baby boomers. For those who test positive, the new draft recommendations call for referral to care and treatment and a brief screening for alcohol use, which can accelerate progression of liver disease in those with hepatitis C.

Who Should Be Tested For Hepatitis C?

Proposed new recommendation:

► Anyone born from 1945 through 1965

Existing, risk-based guidelines:

- Anyone who has ever injected illegal drugs
- Recipients of blood transfusions or solid organ transplants before July 1992, or clotting factor concentrates made before 1987
- Patients who have ever received long-term hemodialysis treatment
- Persons with known exposures to hepatitis C, such as:
 Health care workers after needlesticks involving
 - blood from a patient with hepatitis CRecipients of blood or organs from a donor who later tested positive for hepatitis C
- ► People living with HIV
- People with signs or symptoms of liver disease (e.g., abnormal liver enzyme tests)
- > Children born to mothers who have hepatitis C

CDC FACT SHEET

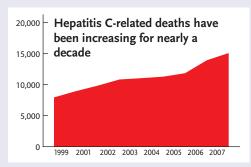
Why Expand Hepatitis C Testing?

CDC is proposing expanded testing guidelines at this time for several reasons:

- ► The vast majority (more than 75 percent) of American adults with hepatitis C are baby boomers. Testing people in this age group will help identify many undiagnosed cases.
- ▶ *Deaths from hepatitis C are on the rise*. As baby boomers age, the likelihood that they will develop serious, life-threatening complications from the disease will continue to increase unless those infections are diagnosed and treated.
- ▶ *New treatments can cure up to 75 percent of hepatitis C cases.* Identifying silent cases of hepatitis infection has the potential to save more lives than ever before, and the research pipeline indicates that even more effective therapies may be available in the future.

About Hepatitis C

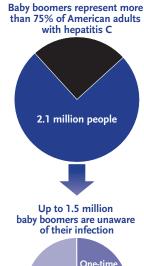
Hepatitis C is a virus that attacks the liver. It is the leading cause of liver transplants and liver cancer — the fastest-rising cause of all cancerrelated deaths — in the United States. The number of Americans who die from hepatitis Crelated conditions is increasing, totaling more than 15,000 in 2007.



Hepatitis C is transmitted through contaminated blood. Today, most people become infected through sharing needles when injecting drugs. Before widespread screening of the U.S. blood supply for hepatitis C began in 1992, the virus also was spread through blood transfusions, organ transplants, and other health care exposures.

Despite the serious illness it can cause, hepatitis C is called a "silent epidemic" because it often has no noticeable symptoms for many years — even decades. Up to 75 percent of those with hepatitis C are unaware that their livers are being slowly damaged. While there is no vaccine to prevent hepatitis C virus infection, all persons with hepatitis C can benefit from becoming aware of their infection, receiving medical care to protect their liver from further harm, and receiving recommended therapy which, in the majority of cases, can clear the virus from their system ("virologic cure").

- ► *Testing saves lives.* CDC estimates that implementing the proposed new testing recommendations could identify 800,000 additional hepatitis C virus infections; providing these patients with appropriate care and treatment could prevent more than 120,000 deaths.
- ► *Testing is cost-effective*. One-time hepatitis C screening for baby boomers, with treatment for those found to be infected, is comparable in cost-effectiveness to other routine preventive health services, such as screening for cervical cancer or cholesterol screening and treatment.





Developing the Recommendations

The draft expanded recommendations were developed by a working group including experts from CDC and other federal agencies, professional associations, community and advocacy groups, and local and state health departments. They will be available at **www.regulations.gov**, docket number CDC-2012-0005, for a public comment period starting May 22.

Following the public comment period, CDC will review and consider all input received, and issue final recommendations later in the year.

If you are a member of the news media and need more information, please visit www.cdc.gov/nchhstp/Newsroom or contact the News Media Line at CDC's National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (404-639-8895 or NCHHSTPMediaTeam@cdc.gov).

