THE POWER OF ALIGNED ADVOCACY: ELIMINATING HCV

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Caring Ambassadors Program
HCV Program Director
Caring Ambassadors Program

• National nonprofit based in Portland, OR

• Mission: To improve the lives of patients and communities by empowering and educating them to be advocates for their own health

• HCV Program run from Chicago

Dante Williams – Coordinator

Jill Wolf - Director
Setting the stage to align advocacy

Objectives:

1. Identify opportunities for program refinement that aligns with HCV elimination strategies
2. Describe the syndemic relationship between opioids and infectious diseases using a local lens
3. Identify YOUR role in the HCV elimination movement
Taking Stock

- History
- Location
- Timing
- Syndemics
- Exposure
Setting the stage to align advocacy

What will YOU do with these opportunities?

The Time Is Now
WHAT IS A SYNDEMIC?
SYN (SYNERGY) + DEMIC (SUFFIX OF EPIDEMIC)

- CDC identifies a syndemic as a synergistically interacting epidemic.
- MedicineNet.com defines a syndemic as a set of linked health problems involving 2 or more afflictions, interacting synergistically, and contributing to excess burden of disease in a population.

http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(17)30003-X/fulltext
EXAMPLE OF SYNDDEMICS: HAV

Homeless population

No vaccine
Unsanitary conditions

Hepatitis A Outbreak

“The cost of a single Hepatitis A outbreak (250 sick people) can be upwards of $1.9 million dollars – including lost revenue, lawsuits, legal fees, fines and medical costs.”

https://www.bioiq.com/curb-costly-outbreaks-hepatitis-a-vaccination/
EXAMPLE OF SYNDEMICS: KENTUCKY

The rise in HCV among women of childbearing age:
National Statistics: 22%
Kentucky Statistics: 213%

The rise in proportion of babies born to women with HCV:
National Statistics: 68%
Kentucky Statistics: 124%
EXAMPLE OF SYNDEMICS: AUSTIN, IN

Scott County, IN
- 11 confirmed HIV cases sparked investigation
- Identified 215 HIV+ w/in 4200 person county
- 84% co-infected HIV/HCV
- Indiana spent $16M+ through August 2015 to stop the outbreak (in 1 county!)
HCV through a MACRO Lens

- Post-Obama Era – flying ‘isms’
- Epidemic of addiction (i.e. opioids)
  - Political will
- Trauma & Mental Health
- Data, Prevalence, and HCV Elimination Plans
- Minimal budget
  - HIV ~ $34 Billion
  - HCV ~$34 Million
HCV through a MACRO Lens

Opioid Overdose Deaths, 2015 and 2016

The death rate from opioid overdose increased 74% in one year in Chicago.


Slide courtesy of Dr. Salisbury-Ashfar & Dr. Carlberg-Racich
HCV through a MACRO Lens

2018 LIST NOTIFIABLE CONDITIONS

- Anthrax
- Arboviral diseases, neuroinvasive and non-neuroinvasive
- California serogroup virus diseases
- Chikungunya virus disease
- Eastern equine encephalitis virus disease
- Powassan virus disease
- St. Louis encephalitis virus disease
- West Nile virus disease
- Western equine encephalitis virus disease
- Babesiosis
- Botulism
- Brucellosis
- Campylobacteriosis
- Cancer
- Carbapenemase Producing Carbapenem-Resistant Enterobacteriaceae (CP-CRE)
- Carbon monoxide poisoning
- Chancroid
- Chlamydia trachomatis infection
- Cholera
- Coccidioidomycosis
- Congenital syphilis
- Syphilis stillbirth
- Cryptosporidiosis
- Cyclosporiasis
- Dengue virus infections
- Severe dengue
- Diphtheria
- Ehrlichiosis and anaplasmosis
- Anaplasma phagocytophilum infection
- Ehrlichia chafeensis Infection
- Ehrlichia ewingii Infection
- Undetermined human ehrlichiosis/anaplasmosis
- Foodborne Disease Outbreak
- Giardiasis
- Gonorrhea
- Haemophilus influenzae, invasive disease
- Hansen’s disease
- Hantavirus Infection, non-Hantavirus pulmonary syndrome
- Hantavirus pulmonary syndrome
- Hemolytic uremic syndrome, posts-diarrhea
- Hepatitis A, acute
- Hepatitis B, acute
- Hepatitis B, chronic
- Hepatitis B, perinatal virus infection
- Hepatitis C, acute
- Hepatitis C, chronic
- Hepatitis C, perinatal infection
- HIV infection (AIDS has been reclassified as HIV Stage III)
- Influenza-associated pediatric mortality
- Invasive pneumococcal disease
- Latent TB Infection (TB Infection)
- Lead, elevated blood levels
- Legionellosis
- Leptospirosis
- Listeriosis
- Lyme disease
- Malaria
- Measles
- Meningococcal disease
- Mumps
- Novel Influenza A virus Infections
- Pertussis
- Pesticide-related illness and injury, acute
- Plague
- Poliomyelitis, paralytic
- Poliovirus infection, nonparalytic
- Psittacosis
- Q fever
- Rabies, animal
- Rabies, human
- Rubella
- Rubella, congenital syndrome
- Salmonellosis
- Severe acute respiratory syndrome-associated coronavirus disease
- Shiga toxin-producing Escherichia coli
- Shigellosis
- Silicosis
- Smallpox
- Spotted fever rickettsiosis
- Streptococcal toxic shock syndrome
- Syphilis
- Tetanus
- Toxic shock syndrome (other than streptococcal)
- Trichinellosis
- Tuberculosis
- Tularemia
- Typhoid fever
- Vancomycin-intermediate Staphylococcus aureus and Vancomycin-resistant Staphylococcus aureus
- Varicella
- Varicella deaths
- Vibrio
- Viral hemorrhagic fever
- Crimean-Congo hemorrhagic fever virus
- Ebola virus
- Lassa virus
- Lujo virus
- Marburg virus
- New World arenavirus — Guanarito virus
- New World arenavirus — Junin virus
- New World arenavirus — Machupo virus
- New World arenavirus — Sabia virus
- Waterborne Disease Outbreak
- Yellow fever
- Zika virus disease and Zika virus infection
HCV through a MACRO Lens

Annual number of hepatitis C-related deaths vs. other nationally notifiable infectious conditions in the US, 2003-2013

Source: Centers for Disease Control and Prevention
PREVALENCE

To get a true picture of HCV prevalence, we need dedicated and supported viral hepatitis surveillance teams funded through local, state and federal government.

Source: Illustration by David H. Spach, MD
TRUE ESTIMATED PREVALENCE

Incarcerated People
Ab+: 16.1% (344,100)
RNA: 10.7% (227,400)

Homeless People
Ab+: 14.7% (23,700)
RNA: 10.8% (17,400)

Nursing Home Residents
Ab+: 14.7% (23,700)
RNA: 10.8% (6,900)

Active Military
Ab+: 1% (13,500)
RNA: 0.5% (6,900)

Gen. Pop
Ab+: 1.5% (3.7 mill)
RNA: 0.9% (2.1 mill)

Add Missed
Ab+: 400,100
RNA: 258,600

THEREFORE...
Ab+: 1.7% (4.1 mill)
RNA: 1.0% (2.4 mil)

HCV through a MEZZO Lens

- Funding, surveillance, reporting
- SB1828 – Needle & Hypodermic Syringe Access Program Act
- Increase of opioid dollars
- Siloes and segregated departments, systems, and healthcare making it difficult to treat the ‘whole person’

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<thead>
<tr>
<th>Vets</th>
<th>HIV</th>
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<tr>
<td>SUD</td>
<td>WOCBA</td>
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<tr>
<td>Prenatal/Perinatal</td>
<td>AARP</td>
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<td>IDOC</td>
<td>Vaccination</td>
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<td>Drug Use Health</td>
<td>Bx Health</td>
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<tr>
<td>1st Responders</td>
<td>Transplant &amp; Cancer Center</td>
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HCV through a MEZZO Lens

  - The time to connect, synergize, and align is NOW!
- Getting to Zero & PrEP
- Restriction Removal – Policy vs. Practice
- Surveillance
- Prevalence

102 Counties in Illinois with a population of 12.7 million people in 2017

<table>
<thead>
<tr>
<th>Poz Rate</th>
<th># Illinoisans</th>
<th>County Ranking</th>
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<tbody>
<tr>
<td>HCV @ 1%</td>
<td>127,000</td>
<td>17th Largest</td>
</tr>
<tr>
<td>HCV @ 2%</td>
<td>254,000</td>
<td>10th Largest</td>
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<tr>
<td>HIV</td>
<td>35,728</td>
<td>40th Largest</td>
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HCV through a MICRO Lens

• Trauma. Vicarious Trauma.
• Do people KNOW treatment is their right? Impact of institutionalized racism & stigma
• Eliminating HCV is no longer a medical/science issue. It is a SOCIAL issue.
• What is your role in HCV micro-elimination?
HCV through a MICRO Lens

Opioid Overdose Death Rate by Age in the United States* and Chicago, 2016

* Includes 31 states and the District of Columbia

Epidemiology Report: Increase in Overdose Deaths Involving Opioids, Chicago 2015-2016

Slide courtesy of Dr. Salisbury-Ashfar & Dr. Carlberg-Racich
HCV through a MICRO Lens

Opioid Overdose Death Rate by Race/Ethnicity in the United States* and Chicago, 2016

- Non-Hispanic African American
- Non-Hispanic White
- Hispanic/Latino
- Non-Hispanic Asian/Pacific Islander

Age-adjusted death rate per 100,000

* Includes 31 states and the District of Columbia


Epidemiology Report: Increase in Overdose Deaths Involving Opioids, Chicago 2015-2016

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HCV through a MICRO Lens

Rules on hepatitis C drugs loosened

Illinois to expand access to stage 3 Medicaid recipients

Larry Holmes, a Medicaid beneficiary who has early stage hepatitis C, worries how sick he'll have to get before the state will cover the drugs for him. (Zbigniew Bzdak/Chicago Tribune)

By Lisa Schencker  Chicago Tribune
Aligned Advocacy

• Find YOUR relationship and connection to the syndemic
• challenge the status quo
• Speak up, speak out, speak often
• How will you be a pioneer?
Contact Us

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