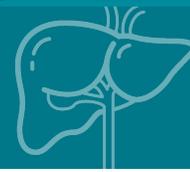


CDC Partnerships and Programs to Prevent and Treat Viral Hepatitis in Tribal Communities



CDC Funding Supports Viral Hepatitis Efforts in American Indian and Alaska Native Communities

From 2021-2023, CDC awarded the Alaska Native Tribal Health Consortium \$1,183,295 under cooperative agreement CDC-RFA-CK20-2003 for four projects to reduce the incidence of and morbidity and mortality related to hepatitis A, hepatitis B, and hepatitis C.

Hepatitis A

25-year Follow up of Hepatitis A Vaccination and Booster Dose Study in Alaska Native Persons

During 1996-1998, Alaska Native Tribal Health Consortium collaborated with CDC's Arctic Investigation Program to conduct a randomized control trial in infants and children to receive hepatitis A vaccination at either age 6 months, 12 months, or 15 months. CDC is funding completion of this 25-year study to determine duration of protection after hepatitis A vaccination early in life, which will help determine if a hepatitis A booster dose is needed later.

Funding: \$248,640 (1 year)

Target Completion Date: 2024

Hepatitis B

Determine the Impact of the Hepatitis B Alaska Native Vaccination and Linkage-to-Care Program on the Reduction of the Incidence of Acute Hepatitis B, Hepatocellular Carcinoma and Liver-Related Death over the past Four Decades

The Alaska Native Tribal Health Consortium Liver Disease and Hepatitis Program may be the first to eliminate hepatitis B virus transmission in an endemic population and reach elimination goals in the United States set by the US Health and Human Services (HHS) and the World Health Organization (WHO). The purpose is to conduct a retrospective data analysis to assess the impact of the program, determine whether 2030 WHO elimination goals have been met, and publish the findings. Funds will also support the use of patient navigators to link Alaska Native persons at high risk for hepatocellular carcinoma to screening and follow-up care.

Funding: \$218,328 (2 years)

Target Completion Date: 2023

Proposal to Conduct a 40-Year Long-term Immunogenicity Study in Alaska Native Persons who Participated in a Phase 4 Hepatitis B Vaccine Trial in 1981-1982

The Alaska Native Tribal Health Consortium is collaboratively working with CDC's Arctic Investigation Program to conduct a unique 40-year follow-up of a subset of a hepatitis B vaccine cohort study of Alaska Native adults and children to assess the long-term protection of the hepatitis B vaccine. No similar cohort exists that can definitively gauge the degree of retained seroprotective antibody levels and challenge dose response among persons who received hepatitis B vaccine. This study provides the evidence base for the duration of immunity after hepatitis B vaccination.

Funding: \$80,327 (1 year)

Target Completion Date: 2024

Hepatitis C

Hepatitis C Elimination Program in Alaska Native persons

The Alaska Native Tribal Health Consortium has developed several proposals to facilitate hepatitis C testing and treatment of Alaska Native persons with hepatitis C. Alaska Native communities are disproportionately impacted by hepatitis C. This program aims to make substantial progress over a 4-year period toward hepatitis C elimination and contribute to the evidence base supporting effective implementation strategies that can be applied to other settings. In 2021, funds supported a project utilizing trained community health aide/providers and telemedicine visits to facilitate expanded hepatitis C testing and treatment for Alaska Native persons residing in 10 rural communities. In 2022 and 2023, funds supported expansion of this project to two additional rural communities; implementation of expanded hepatitis C screening in high-risk settings in the Anchorage area, such as substance use disorder treatment programs and unhoused shelters; and a patient navigator strategy to facilitate linkage of Alaska Native persons with hepatitis C to care.

Funding: \$636,000 (3 years)

Target Completion Date: 2025

CDC Engagement with Tribal Communities: Harm Reduction Activities

With more than 30 years of evidence, syringe services programs (also known as SSPs) provide a wide range of services that reduce risk of overdose and death, infectious disease transmission, and other drug use-related harms. CDC is funding harm reduction implementation and supports an annual survey of SSPs across the nation to identify where more support and resources are needed to successfully implement safe syringe distribution and disposal.

The National Survey of Syringe Services Programs (NSSSP) surveys community-based programs whose services are organized around the principle of giving away free drug use supplies, including sterile syringes and other injection-related equipment. In 2023, the survey team prioritized outreach to tribal organizations to improve survey participation among SSPs. From this outreach, CDC hopes to gain a better understanding of the experiences of SSPs in tribal communities and gain insights into the types of support they need. Preliminary data reveal strong participation with 73% of invited SSPs participating in the survey. The NSSSP report (2022 data) will likely be disseminated fall of 2024.

CDC Publication Highlights Viral Hepatitis Success in Tribal Communities

Evaluation of the Cherokee Nation Hepatitis C Virus Elimination Program – Cherokee Nation, Oklahoma, 2015-2020

In June 2023, CDC's Morbidity and Mortality Weekly Report (MMWR) [published](#) a paper that highlights Cherokee Nation's progress toward eliminating hepatitis C and the power of micro-elimination strategies. The paper reports on efforts by Cherokee Nation to implement a hepatitis C elimination program to improve screening, treatment, and cure among its citizens. The Indian Health Service provided support for the program and technical assistance was provided by CDC. Highlights from the paper show the elimination program's success in that nearly all patients who initiated treatment and returned for posttreatment hepatitis C virus RNA testing were cured. However, the paper also highlights opportunities to improve hepatitis C treatment uptake as only 61% of all patients who were diagnosed with hepatitis C infection initiated treatment. Although the program was very successful in linking people with hepatitis C to care (86%), many patients were unable to access the life-saving medications for treatment after the linkage-to-care visit, likely due to the high cost of treatment and potential treatment delay due to administrative barriers (e.g., prior authorization or consultation with a specialist).

Media Coverage

White House Initiative to Eliminate Hepatitis C in the U.S.

In August 2023, a [national story](#) was released that provided an inside look at the proposed White House initiative to eliminate hepatitis C in the United States. The initiative is being led by Dr. Francis Collins, the former director of the National Institutes of Health and previous acting Science Advisor to President Biden. In March, President Biden proposed spending \$11.3 billion dollars over the next five years to help eliminate hepatitis C. This initiative will prioritize key populations experiencing barriers to hepatitis C treatment, including people who are uninsured or use Medicaid, people involved in the justice system, or people who are American Indian and Alaska Native. If funded by Congress, CDC's role in the initiative would be to expand testing for hepatitis C and linkage to care, to develop innovative and streamlined diagnostics and treatment management, and to provide comprehensive monitoring of progress toward national elimination goals.

Viral Hepatitis Resources

CDC 2022 Viral Hepatitis Surveillance Report

<https://www.cdc.gov/hepatitis/statistics/2022surveillance/index.htm>

CDC 2024 National Progress Report

<https://www.cdc.gov/hepatitis/policy/npr/2024/index.htm>

Program and Operational Characteristics of Syringe Services Programs

<https://stacks.cdc.gov/view/cdc/131788>

Syringe Services Programs Technical Package

<https://www.cdc.gov/overdose-prevention/media/pdfs/Syringe-Services-Programs-SSPs.pdf>

Hepatitis B

Hepatitis B Public Resources

<https://www.cdc.gov/hepatitis-b/public-resources/index.html>

Hepatitis B Factsheet: Find Out if You Are At Risk

<https://www.cdc.gov/hepatitis-b/media/HepBAAtRisk.pdf>

Hepatitis C

CDC Report on Hepatitis C Treatment Barriers

<https://www.cdc.gov/vitalsigns/hepc-treatment/index.html>

Hepatitis C Cure Cascade

<https://www.cdc.gov/nchhstp/newsroom/releases/2023/viral-hepatitis-cure-cascade.html>

National Hepatitis C Elimination Program in the United States

<https://jamanetwork.com/journals/jama/fullarticle/2802533>