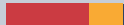


| STOP HEPATITIS IOWA

# Hepatitis C Elimination Kick-Off Event

Welcome! We will start at 9:00 a.m.



# Hepatitis C Elimination Kick-Off Event

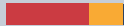
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- Welcome
- Setting the Stage
- Planning Process Overview

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# Setting the Stage— Showing it's Possible

Randy Mayer, Chief  
Bureau of HIV, STI, and Hepatitis





# Overview

- Background
- Assets and Tools
- Challenges and Opportunities
- Planning Process



# Scott County, Indiana, Outbreak of HIV and hepatitis C

County Population 23,740  
Population Austin, IN: 4,259

**2012:** Addiction response

- Abuse deterrent formulation of opioid, Opana

**2013:** Only HIV testing site (Planned Parenthood) defunded

**2014:** 5 people tested positive for HIV

**2015:** 200 HIV infections (92% co-infected with HCV)  
(97% reported injection drug use)

- Four months later, implementation of Syringe Services Program (SSP)
- Recent closures of SSPs, citing “moral issues”

**2017:** 12 new cases reported and total count of PLHIV is 231



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# Scott County, Indiana, Outbreak of HIV and

## hepatitis C

County Population 23,740  
Population Austin, IN: 4,259

2012: Addiction re...

2013:

**HIV outbreak costs state \$58 million**  
Ground zero of epidemic is in Scott County

FEATURED

By MAUREEN HAYDEN CNHI State Reporter Dec 17, 2015 2 min to read

2014: 5

2015: 20

(97

- 
- Re...s, citing "moral issues"

2017: 12 new c... reported and total count of PLHIV is 231



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# After-action Report on Scott County Outbreak

- Local recommendations for syringe services programs were not heeded until the outbreak was firmly established.
- A cluster of diagnoses was detected in Nov 2014, but the epidemic had already peaked at 126 infections by Jan. 20, 2015.
- Modeling shows that early case finding alone could have substantially reduced the size of the epidemic.
- SSPs are a mechanism to identify cases early.

# World Health Organization—Elimination by 2030

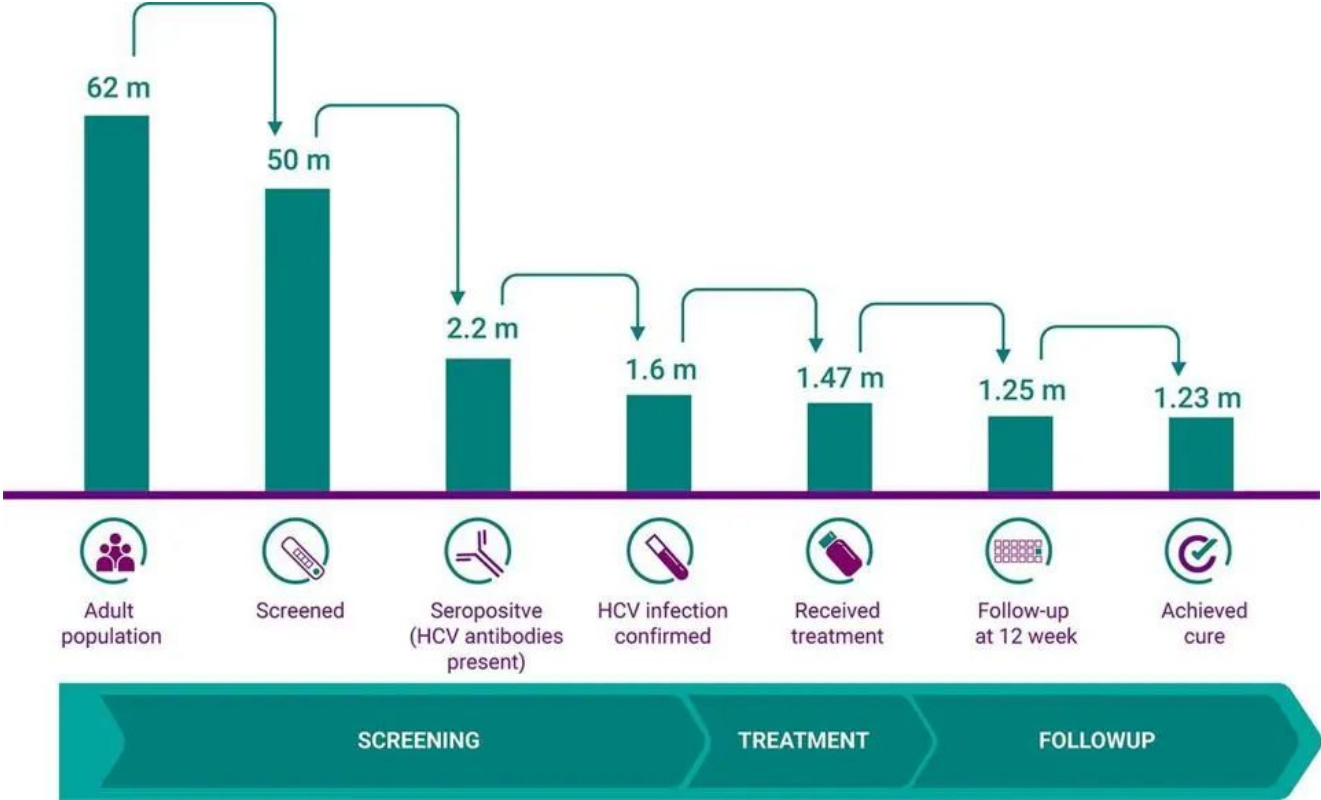
To achieve hepatitis C elimination, countries must meet the following targets set by the World Health Organization:

- 80% reduction in incidence of hepatitis C incidence below 5 per 100,000
- 65% reduction in hepatitis C-related mortality or mortality below 2 per 100,000
- 90% of people with hepatitis C are diagnosed
- 80% of diagnosed people are treated



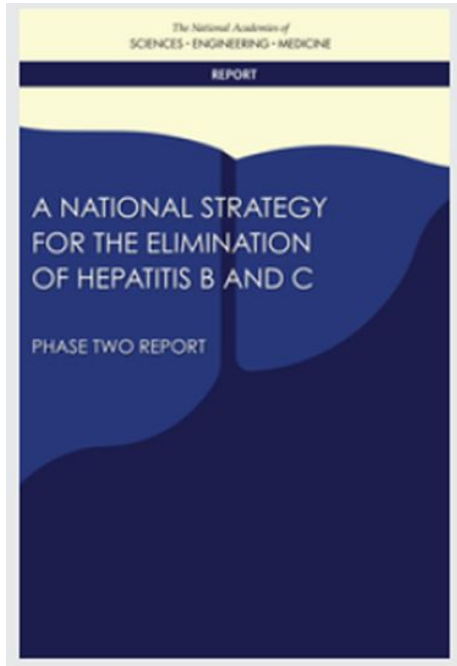
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# Egypt Hepatitis C Elimination Progress



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# 2016 Report from the National Academies of Sciences, Engineering, and Medicine



- Made recommendations:
  - Awareness
  - Prevention
  - Treatment
  - Service Delivery
  - Financing
  - Research
- Conducted modeling exercises
- Set targets for national elimination of hepatitis B and C

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# VIRAL HEPATITIS

## National Strategic Plan A Roadmap to Elimination

for the United States | 2021–2025

### A. Vision

The United States will be a place where new viral hepatitis infections are prevented, every person knows their status, and every person with viral hepatitis has high-quality health care and treatment and lives free from stigma and discrimination.

This vision includes all people, regardless of age, sex, gender identity, sexual orientation, race, ethnicity, religion, disability, geographical location, or socioeconomic circumstance.



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# National Strategic Plan

## A Roadmap to Elimination



**Goal 1: Prevent New Viral Hepatitis Infections**



**Goal 2: Improve Viral Hepatitis-Related Outcomes of People with Viral Hepatitis**



**Goal 3: Reduce Viral Hepatitis-Related Disparities and Inequities**



**Goal 4: Improve Viral Hepatitis Surveillance and Data Usage**



**Goal 5: Achieve Integrated, Coordinated Efforts That Address the Viral Hepatitis Epidemics Among All Partners and Stakeholders**

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# National Strategic Plan

## A Roadmap to Elimination

VIRAL HEPATITIS NATIONAL STRATEGIC PLAN

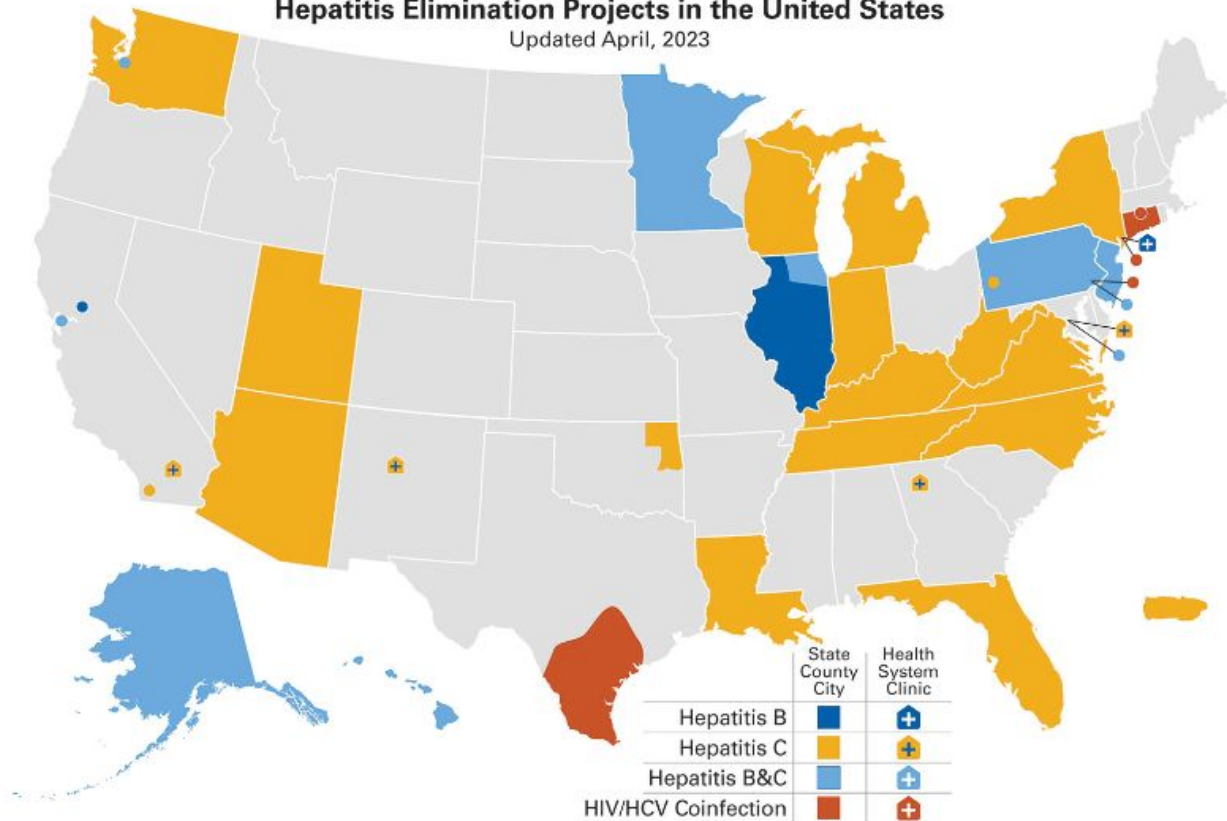
**OVERARCHING GOAL:**

**Elimination  
by 2030**

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## Hepatitis Elimination Projects in the United States

Updated April, 2023



**| STOP HEPATITIS IOWA**

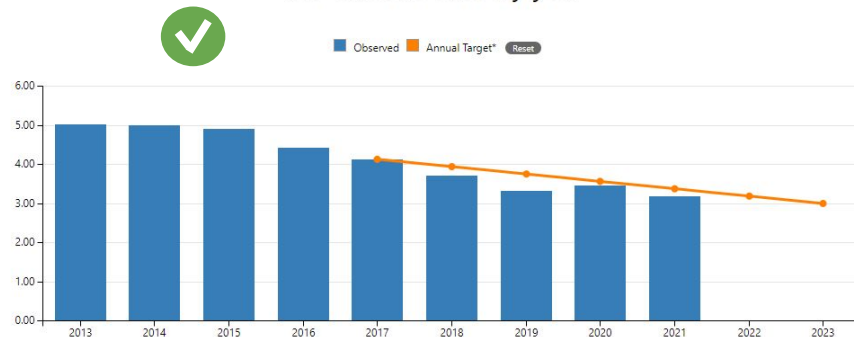
<https://www.hhs.gov/hepatitis/mapping-hepatitis-elimination-in-action/index.html>

# 2023 National Viral Hepatitis Progress Report

Estimated\* new hepatitis C virus infections and annual targets for the United States by year



Age-adjusted rate\* of hepatitis C-related deathst and annual targets for the United States by year



Incidence rate\* of reported new hepatitis C cases among persons aged 18–40 yearst and annual targets for the United States by year



Met or exceed current annual target



Moving *toward* annual target, but annual target was not fully met



Moving *toward* annual target, but annual target was not fully met

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# The President's Budget

## 2024 Budget Proposal



- Aims to eliminate hepatitis C from the US
- Creates a nationwide program
- If funded, the 5-year, \$11.3 billion program would expand testing, broaden access to powerful antiviral drugs, and boost awareness

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# Indicators of Progress





# Iowa Snapshot

## 22,470 Iowans ever reported to Iowa HHS with chronic hepatitis C

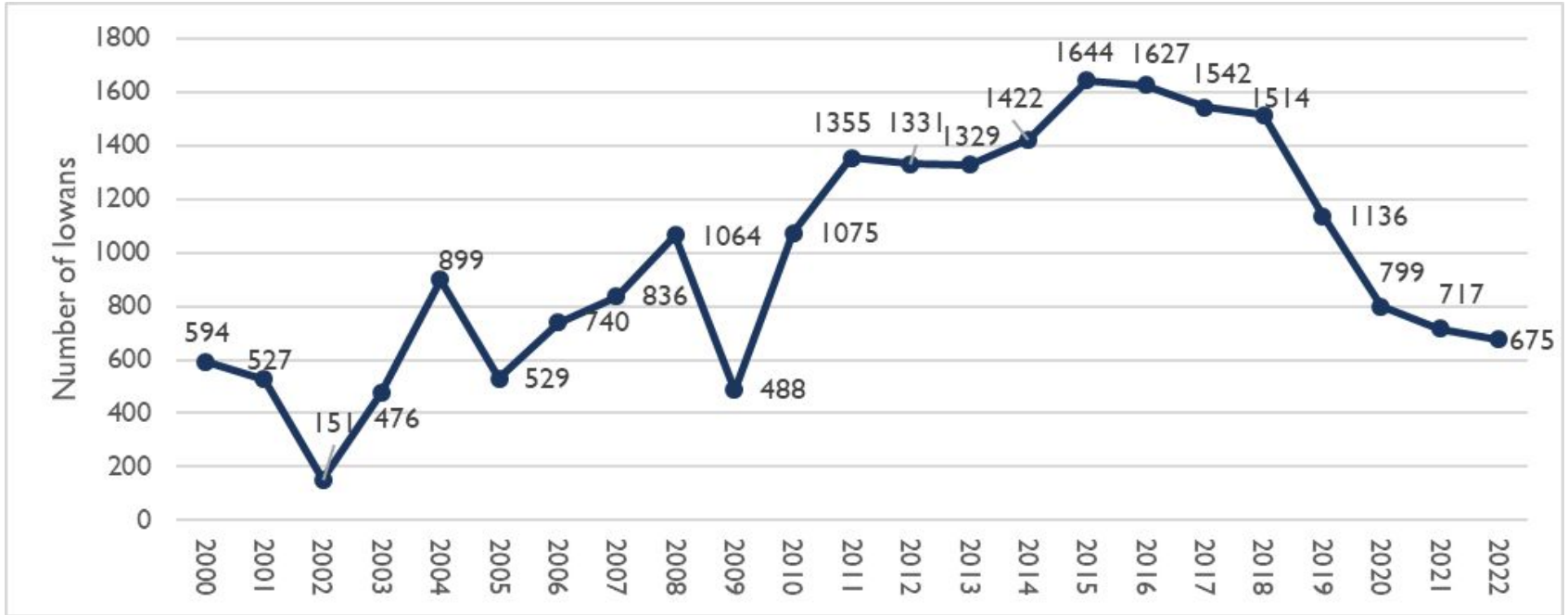
- Total of 27,675 Iowans ever reported with past or current hepatitis C

## Estimation of Prevalence of HCV in Iowa

- CDC estimates 15% to 25% of people with HCV clear the infection spontaneously
- CDC estimates that 40% of people living with HCV have not been diagnosed

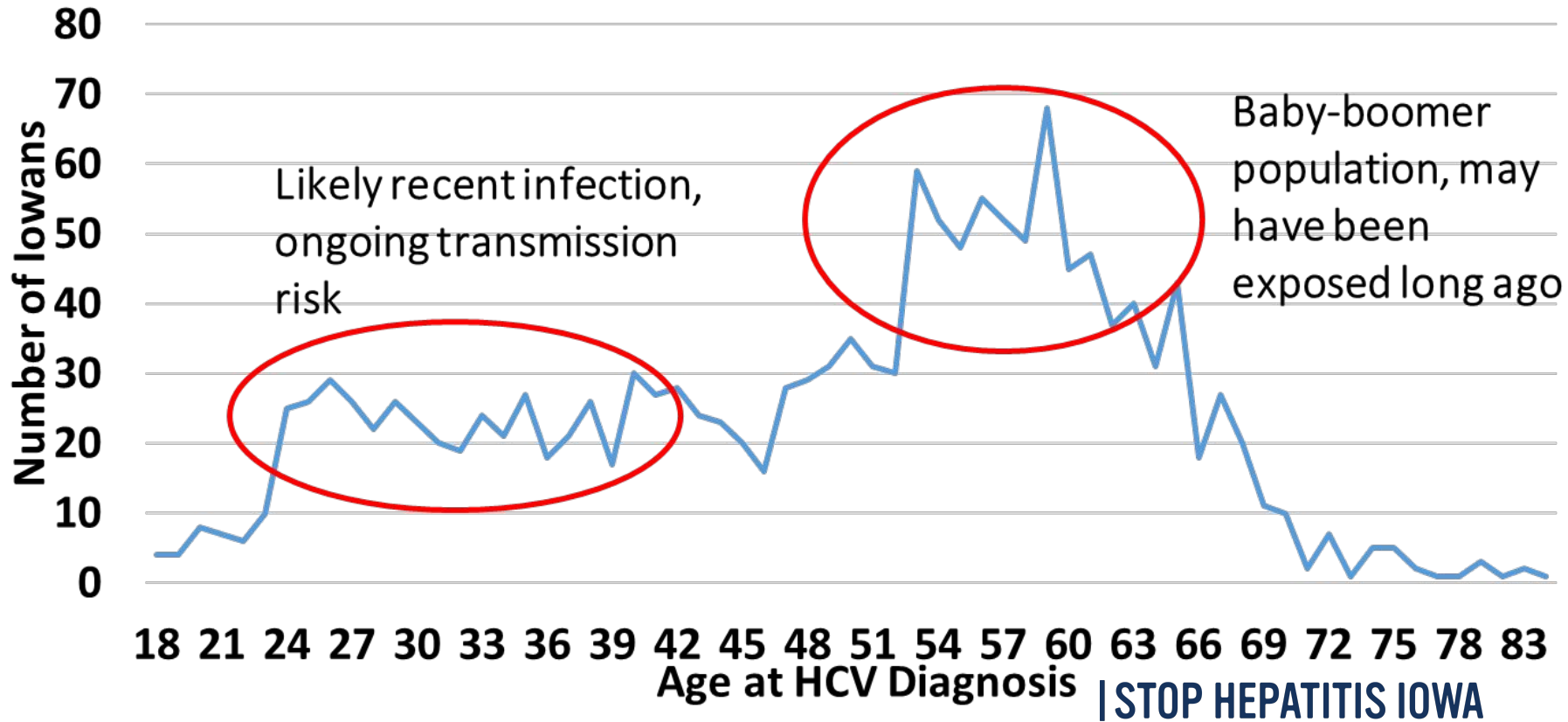
It is estimated that **45,419** Iowans are living with chronic hepatitis C.

# Iowans Diagnosed with Chronic HCV 2000 - 2022



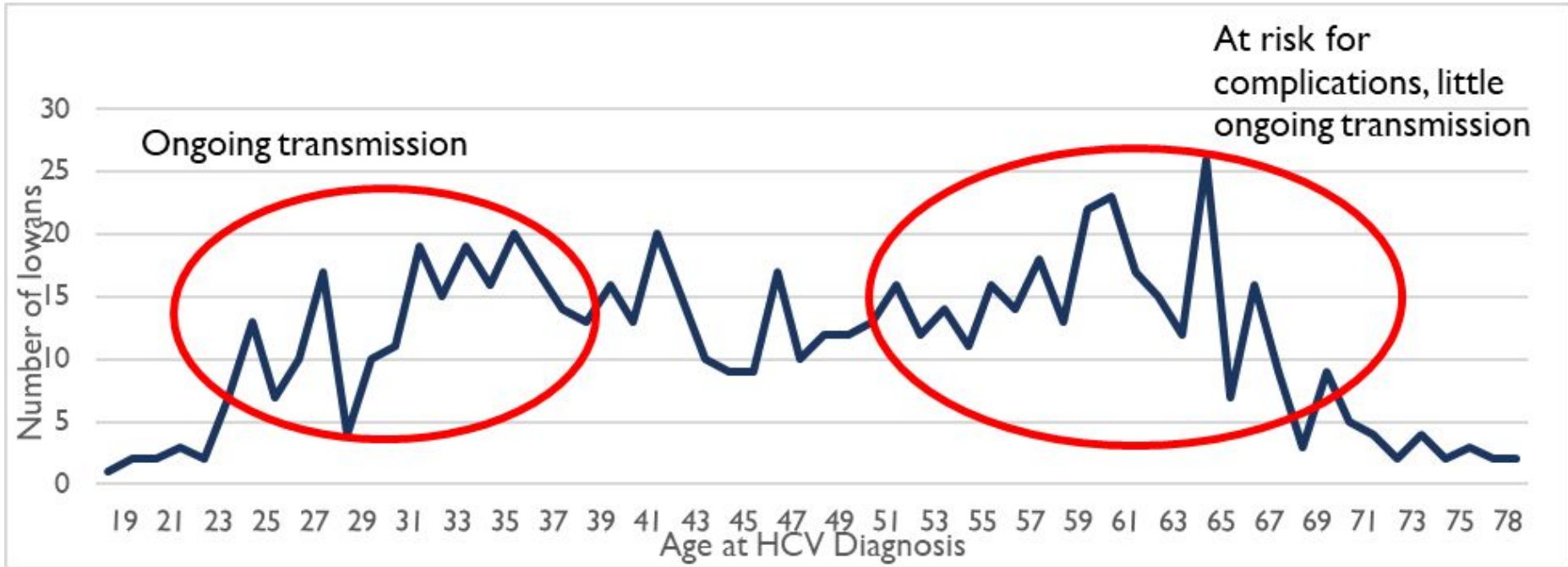
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## Iowans Diagnosed with HCV in 2018, by Age

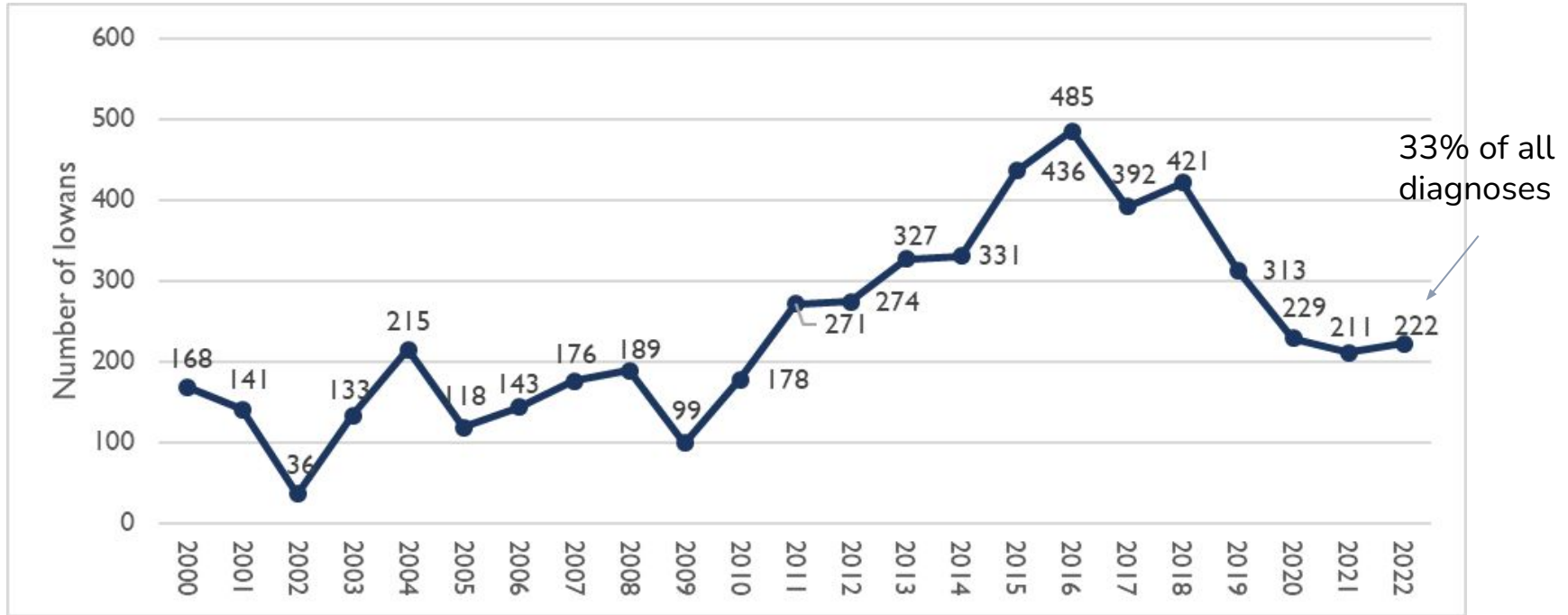




## Iowans Diagnosed with HCV in 2022, by Age

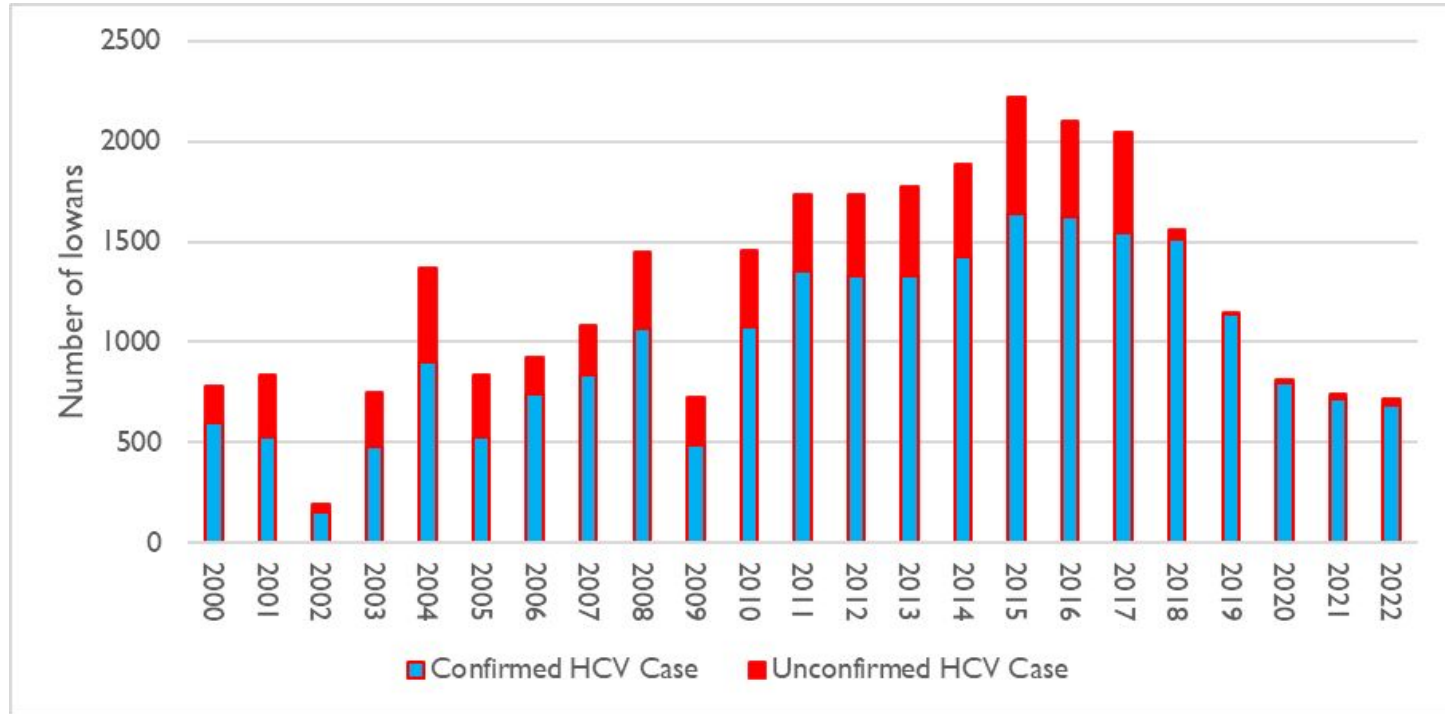


# Iowans Under 40 Years of Age Diagnosed with Chronic HCV 2000 - 2022



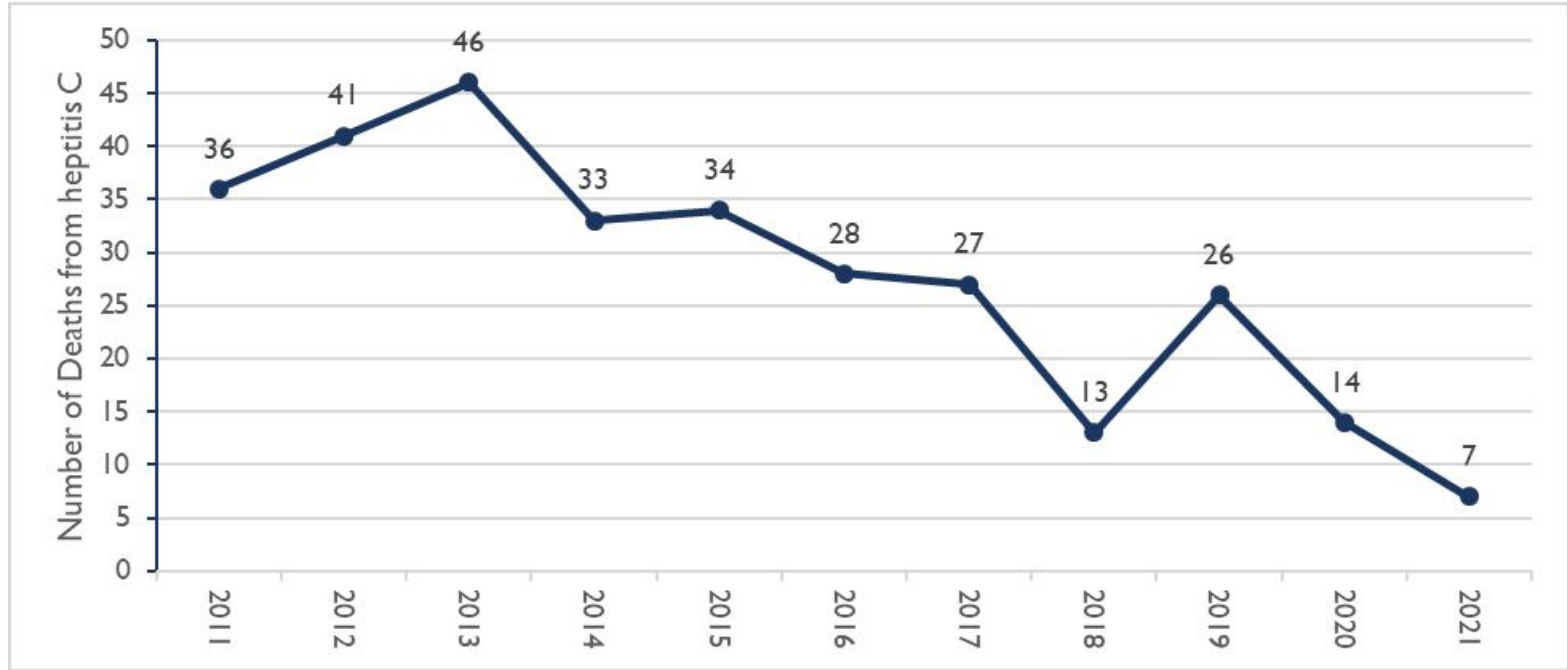
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# Iowans Reported with Antibody-Only or Confirmatory HCV Test Results



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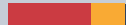
# Deaths Among Iowans from Hepatitis C



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| STOP HEPATITIS IOWA

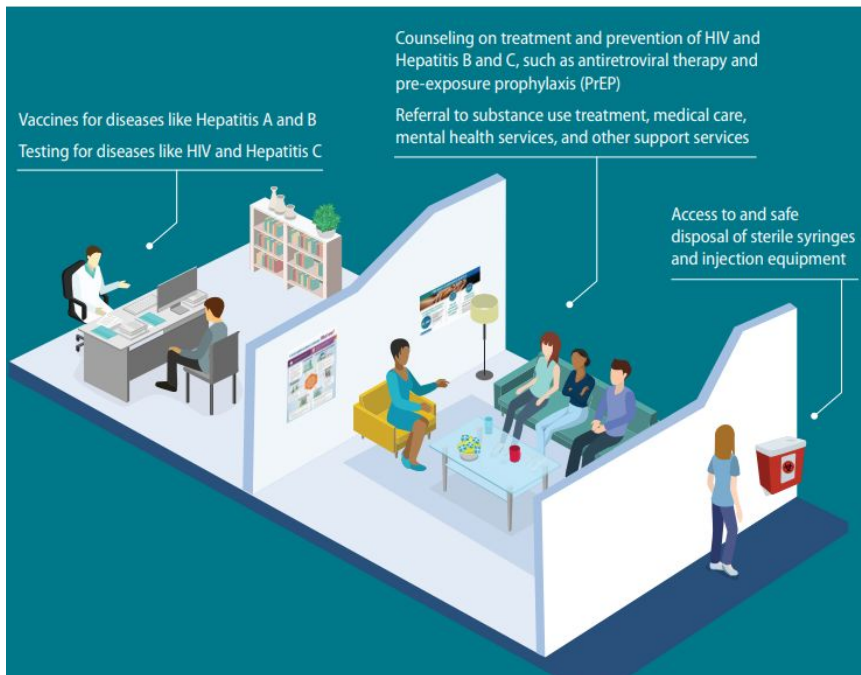
## Assets & Tools



# Sterile Syringes - Syringe Services Programs

## What can a Syringe Services Program (SSP) do?

SSPs adapt to local needs by providing comprehensive support services, such as ways to get treatment, medicines to prevent overdoses, and tools to prevent HIV and viral hepatitis. Many support services may be operated in partnership with federal government funding.



Scientists, including those at the Centers for Disease Control and Prevention (CDC), have studied SSPs for more than 30 years and found that comprehensive SSPs benefit communities.



SSPs **save lives** by lowering the likelihood of **deaths** from overdoses.



Providing testing, counseling, and sterile injection supplies helps prevent outbreaks of other diseases. For example, SSPs are associated with a **50% decline** in the risk of HIV transmission.



Users of SSPs were **three times more likely** to stop injecting drugs.

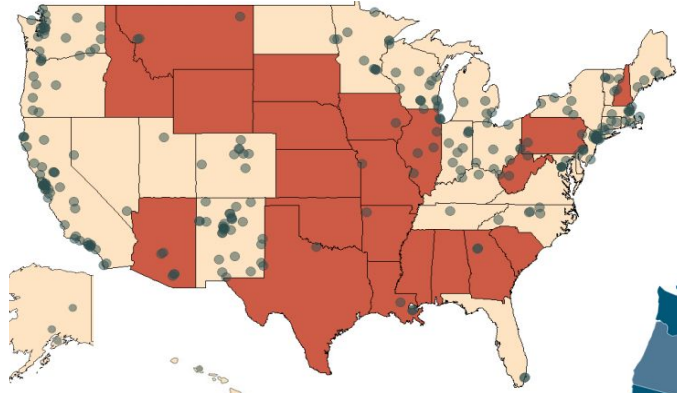


Law enforcement benefits from reduced risk of needlesticks, **no increase in crime**, and the ability to save lives by preventing overdoses.



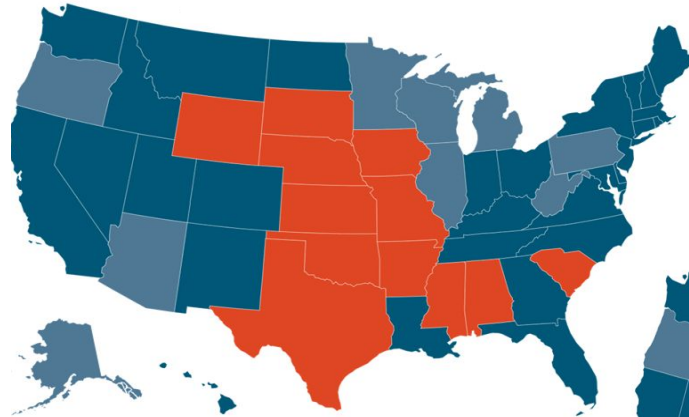
When two similar cities were compared, the one with an SSP had **86% fewer syringes** in places like parks and sidewalks.

2017



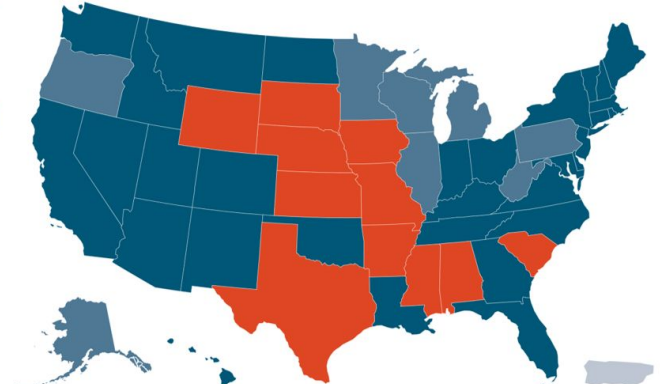
Jurisdictions without Legal Syringe Exchange: 21

2019



Jurisdictions without Legal Syringe Exchange: 12

2022



Jurisdictions without Legal Syringe Exchange: 11

Legend

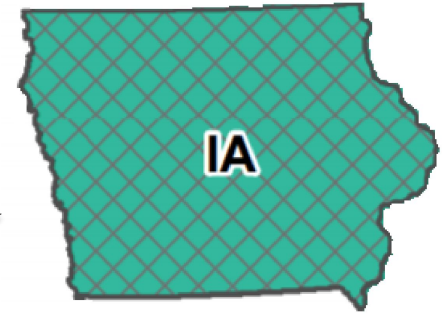
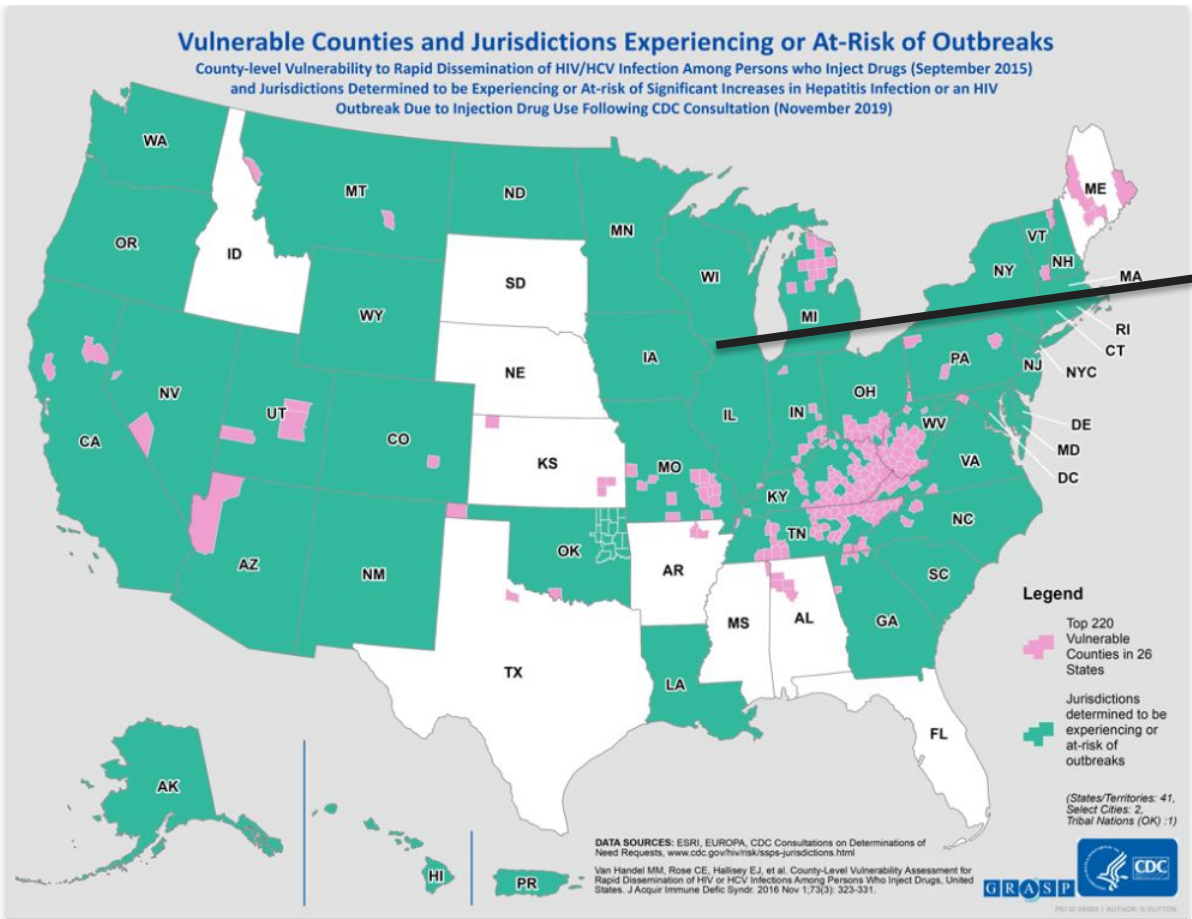
-  Illegal
-  Locally Permitted
-  Legal



# Determination of Need

## Vulnerable Counties and Jurisdictions Experiencing or At-Risk of Outbreaks

County-level Vulnerability to Rapid Dissemination of HIV/HCV Infection Among Persons who Inject Drugs (September 2015)  
and Jurisdictions Determined to be Experiencing or At-risk of Significant Increases in Hepatitis Infection or an HIV Outbreak Due to Injection Drug Use Following CDC Consultation (November 2019)



Jurisdictions determined to be experiencing or at-risk of outbreaks  
*(States/Territories: 34, Select Counties: 7, Select Cities: 2)*

**Legend**  
 Top 220 Vulnerable Counties in 26 States  
 Jurisdictions determined to be experiencing or at-risk of outbreaks

(States/Territories: 41, Select Cities: 2, Tribal Nations (OK): 1)

DATA SOURCES: ESRI, EUROPA, CDC Consultations on Determinations of Need Requests, www.cdc.gov/hiv/risk/sps-jurisdictions.html  
 Van Handel MM, Rose CE, Hallisey EJ, et al. County-Level Vulnerability Assessment for Rapid Dissemination of HIV or HCV Infections Among Persons Who Inject Drugs, United States. J Acquir Immune Defic Syndr. 2016 Nov 1;73(3): 323-331.



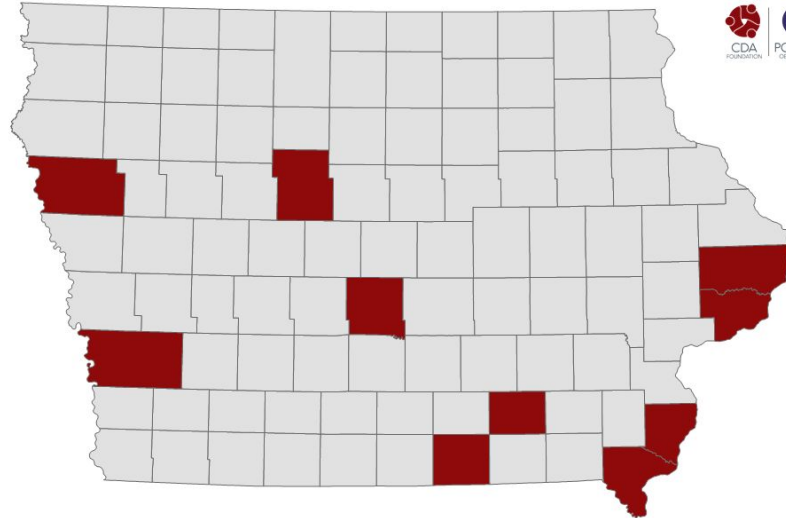
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# Iowa Hepatitis C Vulnerability Assessment

1. Wapello County
2. Appanoose County
3. Des Moines County
4. Lee County
5. Pottawattamie County
6. Webster County
7. Polk County
8. Clinton County
9. Woodbury County
10. Scott County

These counties are considered to be most vulnerable to an outbreak (or rapid increase) of HCV or HIV.



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# Factors found to be associated with HCV diagnoses

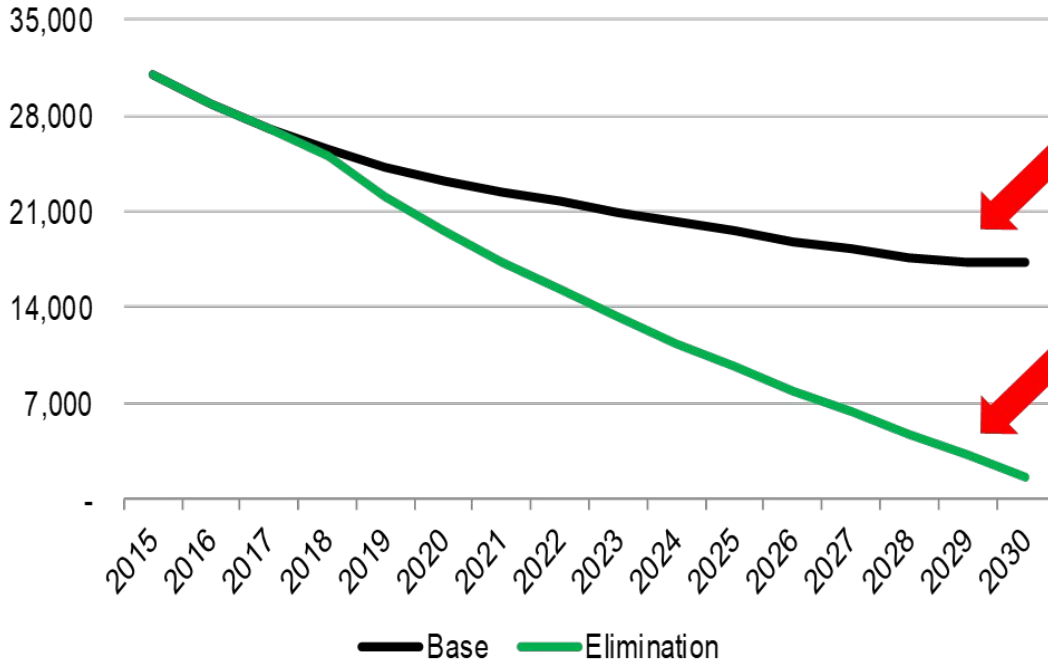
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- Property crimes
- # Mental health providers/ pop
- % unemployed
- Rate of female heads of households
- # Primary care providers / pop
- # Methadone clinics
- Premature deaths
- Percentage of adults who smoke
- HIV diagnoses among PWID
- Nonfatal overdoses
- Drug treatment admissions
- # Vacant housing units
- Percentage of uninsured people
- Chlamydia and gonorrhea diagnoses



# Hepatitis C Elimination Modeling

Projected number of Iowans with Hepatitis C



“Base” means we do nothing differently than we’re doing now. People are getting cured, but Iowa will plateau at 17,000 people with hepatitis C.

“Elimination” means we diagnose and treat all Iowans with hepatitis C and implement interventions to prevent transmission of hepatitis C. Modeling shows that a 90% reduction is possible with expanded prevention and treatment. **| STOP HEPATITIS IOWA**

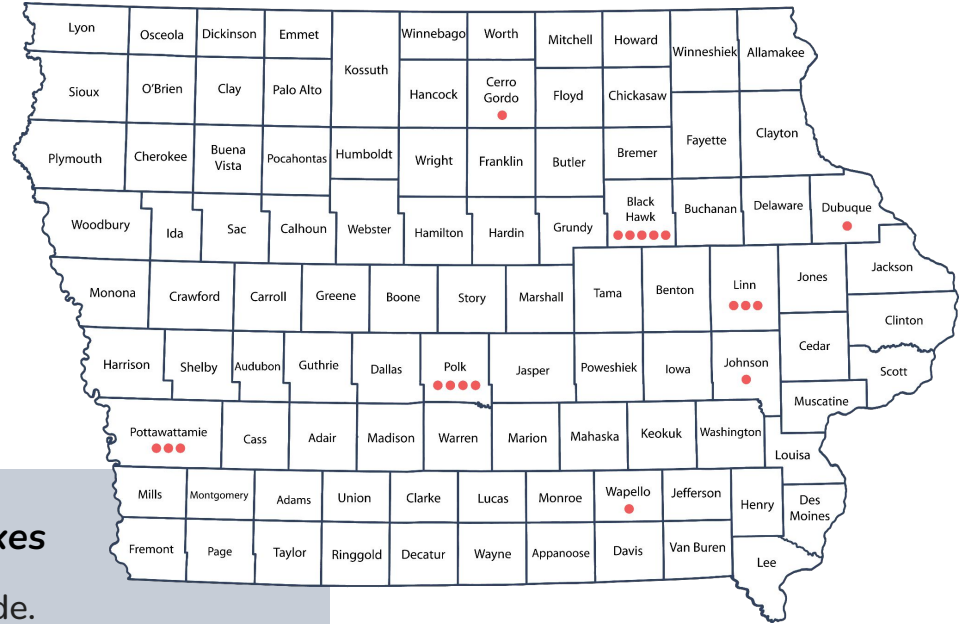
# Harm Reduction Supply Distribution

In 2021 and 2022, the HIV and Hepatitis Prevention program collaborated with the legacy Bureau of Substance Use to fund the placement of community lock boxes to further support access to harm reduction supplies for PWID.



## About Community Lock Boxes

- Accessible with an entry code.
- Co-located with secure syringe disposal units.
- Lock boxes contain harm reduction supplies directly supported by HHS; additional supplies may also be contributed by community partners.



## Lock Box Locations

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# Harm Reduction Service Organizations

Iowa currently has **three harm reduction organizations** in operation across the state, including **Quad Cities Harm Reduction (QCHR)**, **Iowa Harm Reduction Coalition (IHRC)**, and **Dubuque Harm Reduction**.

Services provided include:

- Harm Reduction Supply Distribution and Training
- Overdose Prevention Education
- Linkage to Community Services and Resources
- HIV and Hepatitis C Screening and Linkage to Care Services



# Hepatitis C Testing Recommendations Update

On April 10, 2020, the CDC released updated testing criteria, expanding upon the previous recommendations to include:

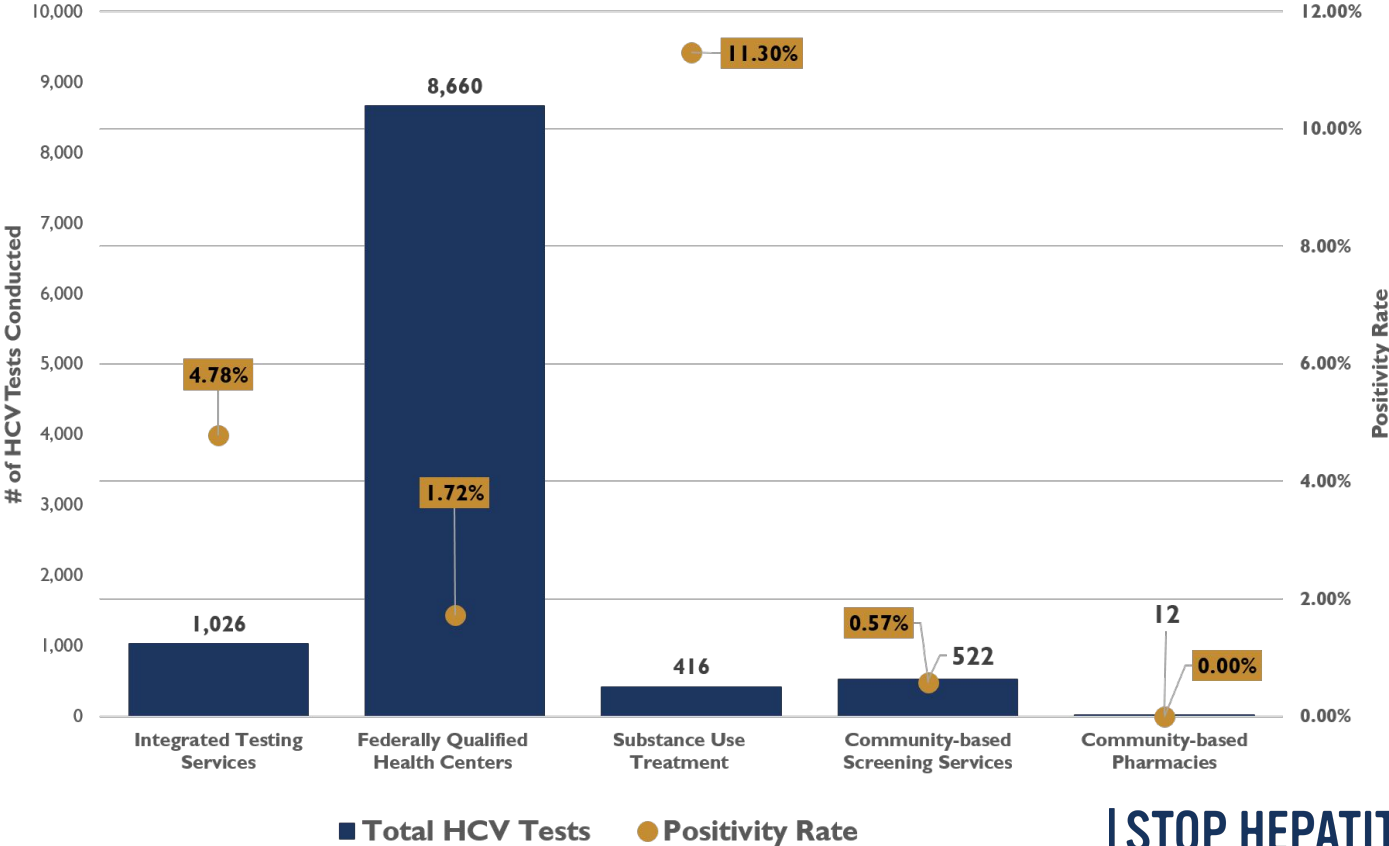
- **Once in a lifetime** (universal) screening for **all adults ages 18 and above**, except in settings where the prevalence of HCV (defined by RNA-positivity) is <0.1%; and
- Screening for **all pregnant persons during each pregnancy**, except in settings where the prevalence of HCV (defined by RNA-positivity) is <0.1%.



The updated recommendations further note:

***“Any person who requests testing should receive it, regardless of disclosure of risk, because many persons might be reluctant to disclose stigmatizing risks.”***

# 2022 Total Iowa HHS Supported HCV Testing At-A-Glance



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# Treatment

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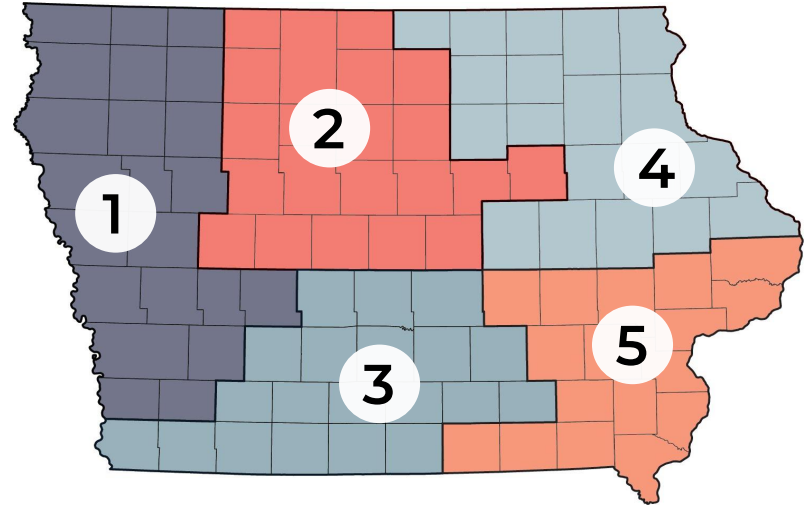
- HCV treated using direct-acting antiviral (DAA) tablets.
- DAA tablets safest and most effective
  - 90% effective in clearing infection
- Tablets taken for 8 to 12 weeks
- Few side effects
- Treatment can be repeated or extended
- Pregnant persons must delay treatment





## Regional Health Specialists

- Academic Detailing: **RHS provide evidence-based HIV, STI, and hepatitis education, especially to providers in rural parts of the state.**
- When RHS deliver support and education to their stakeholders, those clinicians and service providers make better, evidence-based decisions, and those decisions improve the health of diverse populations throughout Iowa.
- Facilitated by the relationships developed between the RHS and the clinical/service provider workforce, patients have improved access to culturally responsive prevention services, including hepatitis C testing and linkage to treatment.



*The five RHS each serve a different region of the state.*

# Additional Assets

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- Department of Corrections (DOC) implements opt-out HCV testing for all individuals entering prisons
- DOC is providing HCV treatment
- DOC is partnering with HHS to get access to 340b/reduced cost medications so more people can be treated

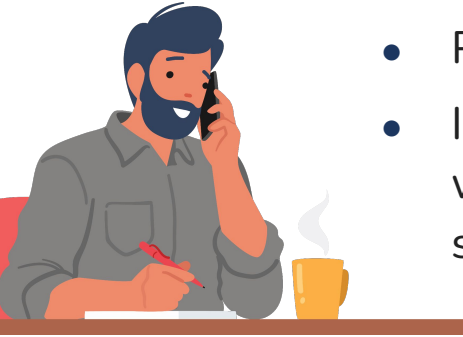


- Primary Care Association Project ECHO
- Capacity building & consultation to increase providers treating for HCV in Iowa's FQHCs

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# New & Innovative

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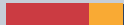
- Prioritized HCV Treatment Navigation
- Individualized navigation services for people who inject drugs to increase access to and support individuals during HCV treatment
  
- I - ACCESS Program
- Telemedical delivery of HCV treatment and substance use disorder treatment



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# Challenges & Opportunities

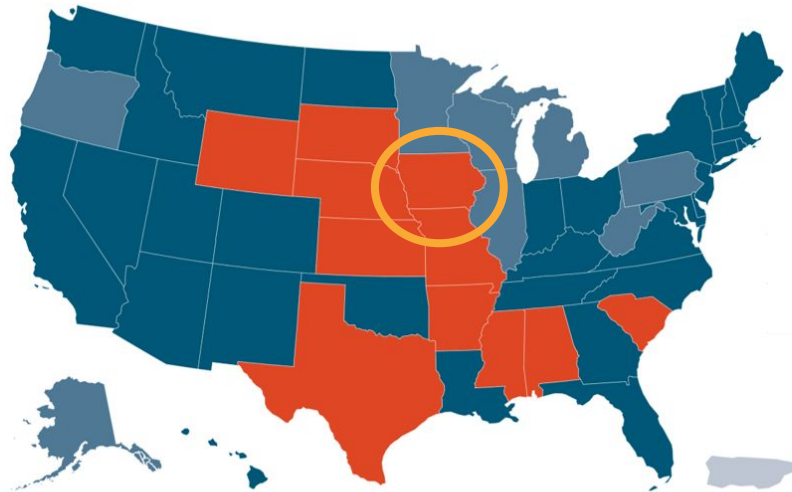


# Current Landscape in Iowa: Syringe Access

- Syringe Services Programs cannot legally operate in Iowa
- Pharmacists can sell syringes to individuals without a prescription



- In 2022, the Iowa Pharmacy Association conducted a survey of Iowa pharmacists to better understand pharmacist knowledge, attitudes, and practices related to selling syringes, as well as current pharmacy policies



## Legend

- Illegal
- Locally Permitted
- Legal

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**40%**

**OF ALL PEOPLE LIVING  
WITH HEPATITIS C  
DON'T KNOW  
THEY HAVE IT.**

**MILLIONS OF AMERICANS HAVE  
HEPATITIS C.  
MANY DON'T KNOW IT.**

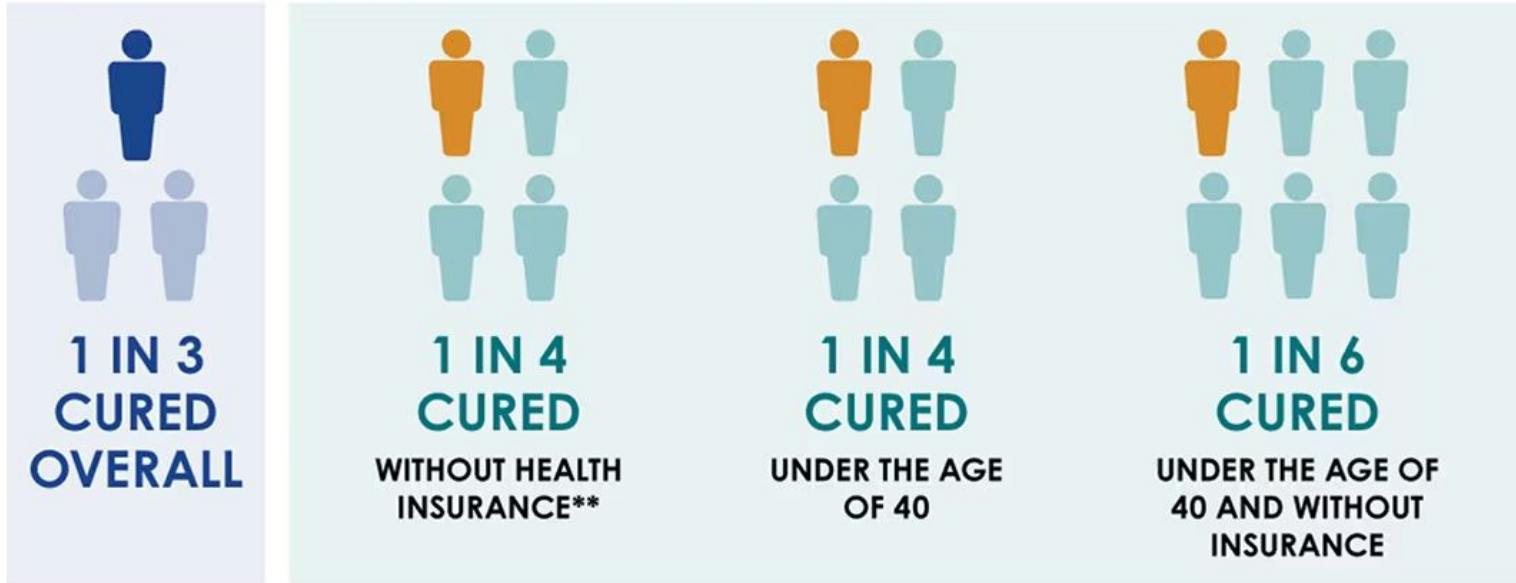


U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention

**HepVu** 

**| STOP HEPATITIS IOWA**

# ADULTS DIAGNOSED AND CURED\* OF HEPATITIS C IN THE U.S., 2013-2022

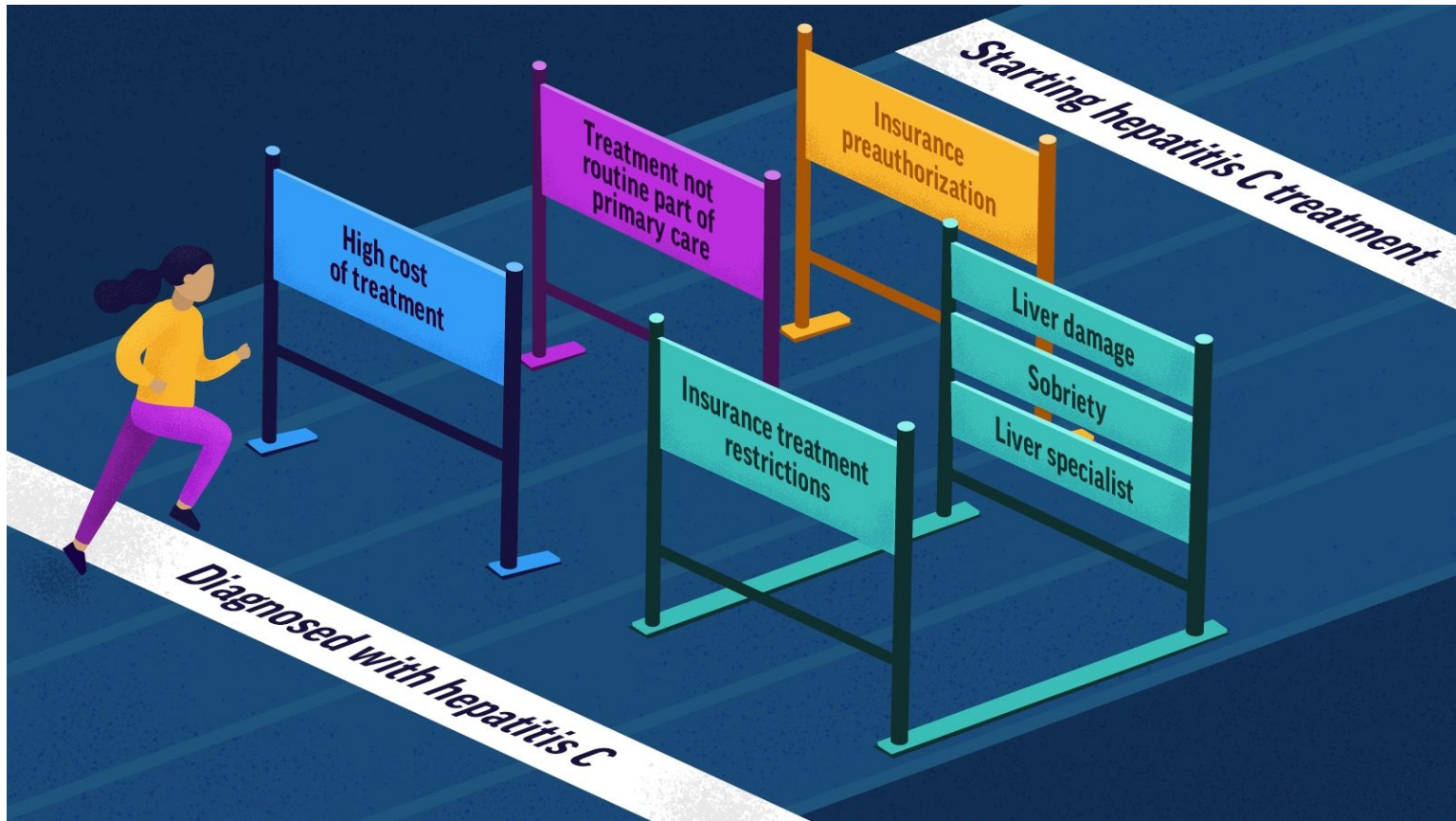


\*Cured is defined as viral clearance, which is an undetectable hepatitis C virus ribonucleic acid (HCV RNA) after a prior test result of detectable HCV RNA.

\*\*Referred to as Other (client or self-pay) in the analysis

Source: Centers for Disease Control and Prevention





U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention

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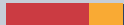
| STOP HEPATITIS IOWA

# Hepatitis Elimination Planning Process

Biz McChesney

HIV and Hepatitis Section Supervisor

Bureau of HIV, STI, and Hepatitis



# Hepatitis Advisory Body & Planning History

**2003**

Iowa Viral Hepatitis Task Force formed

**2004**

First Iowa Viral Hepatitis Plan released

**2016**

Viral Hepatitis Task Force merged with HIV prevention and care planning body to form the Iowa HIV and Hepatitis Community Planning Group (CPG)

**2017**

Released the 2017–2021 Iowa Hepatitis Action Plan



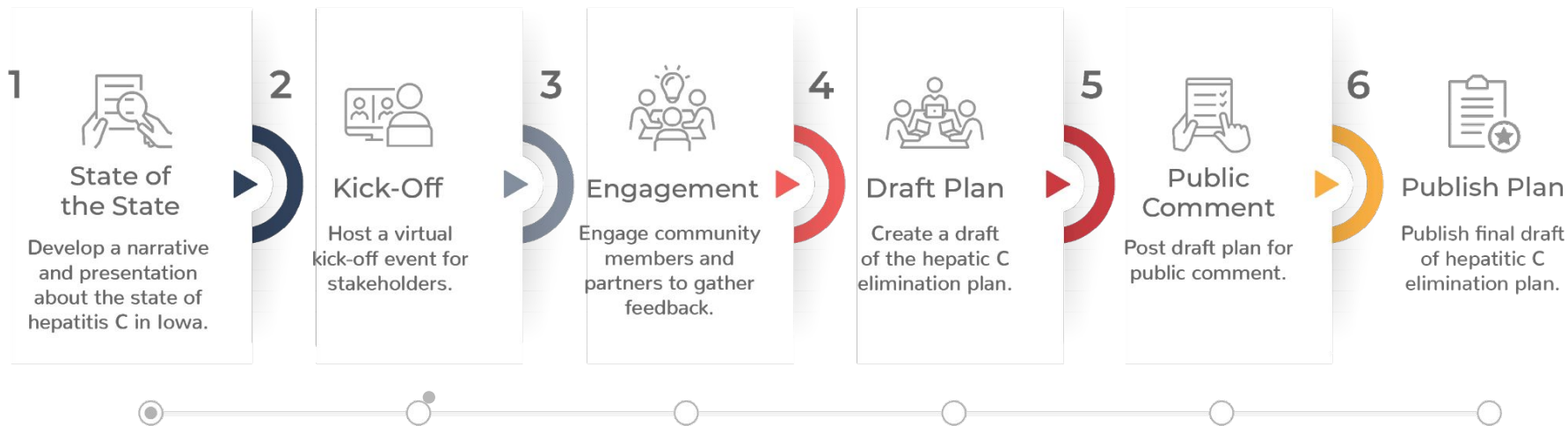
Iowa Department of Public Health  
2017-2021 Iowa Hepatitis Action Plan



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# Hepatitis C Elimination Planning Process for Iowa



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# The time is now to end hepatitis C in Iowa.

[LEARN MORE](#)

[JOIN US](#)



Vision

# Focus Groups & Key Informant Interviews

- Health Initiatives for People Who Use Drugs (HIPWUD)
- Internal HHS syndemic work group
- People living with Hepatitis C
- People who have completed HCV treatment
- People who use drugs
- Medical providers



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# Regional Meeting Cities



# Regional Meetings

Burlington	Monday, October 2	<p>All meetings will be held from 10:00 a.m. to 2:00 p.m.</p> <p>Lunch will be provided.</p>
North Liberty	Tuesday, October 3	
Dubuque	Wednesday, October 4	
Quad Cities	Thursday, October 5	
Centerville	Wednesday, October 11	
Des Moines	Tuesday, October 17	
Mason City	Thursday, October 19	
Council Bluffs	Wednesday, October 25	
Sioux City	Thursday, November 9	



# Regional Meeting Locations

Please register for the regional meeting that works best for you! Attendance at each meeting location is not limited to people living and/or working in the city or area.



October 2, 2023

**Burlington, IA**

Burlington Public Library  
210 Court St.  
Burlington, IA 52601

[Sign up now!](#)



October 19, 2023

**Mason City, IA**

Location TBD

[Sign up now!](#)



October 3, 2023

**North Liberty, IA**

North Liberty Public Library  
520 W. Cherry St. #9797  
North Liberty, IA 52317

[Sign up now!](#)



October 24, 2023

**Sioux City, IA**

[Siouxland District Health Department](#)  
1014 Nebraska St. #1435  
Sioux City, IA 51105

[Sign up now!](#)



October 4, 2023

**Dubuque, IA**

Crescent Community Health Center  
1690 Elm St. #300  
Dubuque, IA 52001

[Sign up now!](#)



October 25, 2023

**Council Bluffs, IA**

[Pottawattamie Veterans Affairs](#)  
623 6th Ave.  
Council Bluffs, IA 51501

[Sign up now!](#)



TBD



Location TBD

## Get Involved



### Attend a Regional Meeting

Join us in person to develop strategies to achieve HCV elimination in Iowa.

[Learn More](#)



### Make Your Voice Heard

We want to hear from you! Leave feedback, submit ideas, and ask questions through our online form.

[Submit Ideas](#)



### Stay Connected

Sign up for our email newsletter! You'll receive important updates and chances to get involved.

[Sign Up Now](#)

# Thank You!

Visit the Stop Hepatitis Iowa website at  
<http://www.StopHepatitisIowa.org>

*We look forward to seeing you at  
one of our regional meetings!*

