

For Immediate Release

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Experts Release Landmark Findings and Recommendations on Hepatitis C in African Americans

Leading experts convene and issue a Consensus Panel paper on Hepatitis C; which provides an undeniably clear roadmap for addressing this health disparity. The National Medical Association raises the alarm for African Americans and calls for an aggressive approach.

Silver Spring, Maryland-(November 5, 2013) — The National Medical Association (NMA) today released the much anticipated Consensus Panel Paper entitled: **Hepatitis C: A Crisis in the African American Community**. The NMA is the nation’s largest and oldest association of African American physicians and when faced with the startling facts on the burden of Hepatitis C (HCV) in the African American community; Immediate NMA Past President, Rahn K. Bailey, MD convened experts to make recommendations to address this crisis.

Hepatitis C is a viral disease. “Hepatitis C is more common and results in higher primary liver cancer and death rates due to liver disease in African Americans compared to White Americans. This disparity in morbidity and mortality can be reduced by current HCV treatments which cure infection in 55-60% of African Americans.” To explore the issues that lead to higher rates of disease and poorer outcomes among African Americans, the NMA convened a Consensus Panel. The Consensus Panel was Co-Chaired by two of the nation’s leading hepatologists; Charles Howell, MD, Director of Hepatology Research at the University of Maryland and Andrew Muir, MD, Director of Gastroenterology and Hepatology Research at Duke Clinical Research Institute.

The Rationale: The Centers for Disease Control (CDC) recommends that all U.S. baby boomers should get a one-time test for HCV. One in 30 baby boomers – the generation born from 1945 through 1965 – has been infected with HCV, and most don’t know it. The panel supports these guidelines but recommends increased screening of HCV; in all at risk populations. Dr. Andrew Muir explains, “Hepatitis C has the potential to devastate the African American community in the next 10 to 20 years. It is a quiet infection until the very late stages, and so it is critical that all patients particularly African Americans patients get screened for HCV before symptoms develop. There are now treatments that can cure HCV and prevent the complications. We have the ability to prevent cirrhosis and liver cancer from HCV, but we first have to find the patients living with this infection.”

Dr. Charles Howell strongly agrees, “It is imperative that we have focused efforts to identify African Americans infected with HCV and that infected people receive adequate healthcare for this deadly disease.” Dr. Michael LeNoir, President of the NMA, states “The National Medical Association’s Hepatitis C Consensus Paper is just another step in our process to address the impact of Hepatitis C in all communities with an emphasis on minority populations. The NMA is more committed than ever to the implementation of the Hepatitis C action plan. Our organization will step up the effort to educate our communities and our providers about the potential dangers of HCV infection.”

The National Medical Association's Hepatitis C Consensus Panel's findings and recommendations include but are not limited to the following:

- **There is a need for increased HCV awareness.** Data reveal that a minimum of 4 million Americans nationwide are HCV infected, 3 million have a chronic HCV infection, yet the majority of those infected are unaware of their condition. The Consensus Panel recommends that current materials be modified to embody greater concordance with African American culture, values and attitudes. Specifically, the panel recommends that new copy, new graphics, and messages be tested through special funding from the U.S. Centers for Disease Control and that new material be developed that resonate more strongly with African Americans.
- **There is a need to accelerate current efforts to improve accuracy of HCV prevalence and incidence data which could lead to greater numbers of HCV-infected people entering into treatment.** The Consensus Panel recommends that its members and key partners engage in a campaign to support one-time screening for baby-boomer cohorts who comprise the majority of those with an HCV infection; and urges constituent organizations to write endorsements to their health plans so that one-time HCV screening for people born between 1945 and 1965 is included as a core service.
- **There is a need to reduce or eliminate under-diagnosis of HCV.** The Consensus Panel recommends that physicians, nurses and other healthcare professionals bring HCV screening out of their offices and into nontraditional settings where high-need populations reside, rather than waiting for these populations to seek treatment. The panel recommends that every physician and/or other healthcare professionals identify and serve as a continuum of care so that those who test positive for HCV can be immediately linked to treatment.
- **There is a need to provide training on HCV to current and future healthcare providers.**
- **There is a need for greater inclusion of African Americans in clinical trials.** The panel recommends that the NMA expand its intensive training using experts that prepare more African American-serving physicians to participate in clinical trials.
- **There is a need for increased access to care and treatment for HCV-infected people.** The Consensus Panel recommends that the NMA support the enrollment of populations at high risk of HCV into an insurance plan under the Affordable Care Act. The Consensus Panel recommends that all providers train at least one person on staff to directly provide benefits establishment and/or link uninsured patients to organizations that engage in benefit establishment. Through this process, Medicaid and/or Medicare-eligible patients can be linked with public insurance.
- **There is a need to address Hepatitis C in the criminal justice population.** The Consensus panel recommendations include: mandatory HCV screening for all people in jails or prison upon entry; a revision of prison and jail intake sheets so that long-time injection drug users, people with HIV/infection, and other very high-risk groups can be identified; mandatory screening of and provision of information to all people incarcerated upon release; an HVC training curriculum specifically targeted toward the criminal justice population; funding to conduct new research, data collection and analyses of HCV screening, care, and treatment in jails and prisons.
- **There is a need for increased monitoring of outcomes of HCV screening.** The Consensus Panel recommends that medical professionals utilize electronic medical records to track and monitor the outcomes of African Americans infected by HCV.
- **There is a need to analyze and apply new treatment and treatment approaches.** The Consensus panel recommends that the sample sizes, data collection reports, and overall research designs on new treatments and treatment approaches be carefully reviewed.
- **There is a need to address Gender and HCV.** The Consensus Panel recommends that more researchers disaggregate their work by gender so that the unique needs of both African American males and females can be characterized.

For more information; contact the National Medical Association and to download a copy of the report, visit www.NMAnet.org.

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Founded in 1895, the National Medical Association is the nation's oldest and largest medical association representing the interests of more than 35,000 African American physicians and their patients. The NMA advocates for policies that assure equitable and quality health care for all people. The Consensus Panel was made possible, in part, by an educational grant and/or contribution from AbbVie, Janssen Pharmaceuticals and OraSure Technologies.