



Viral Hepatitis & Liver Cancer Prevention Profile

Each year in the United States, around 31,000 people get liver cancer. Did you know that among people with certain liver cancers in the United States, more than half have hepatitis C and around 15% have hepatitis B? Less than 18% of people diagnosed with any kind of liver cancer live five or more years.

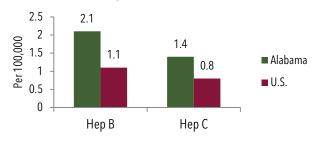


Populations at higher risk of hepatitis B infection include people born in Asia and sub-Saharan Africa, people who inject drugs, incarcerated individuals, men who have sex with men and health care workers at risk of occupational exposure.⁴

Populations at higher risk of hepatitis C infection include baby boomers (born 1945-1965), those who inject drugs or who have ever injected drugs, individuals with HIV, and prior recipients of transfusions or organ transplants.⁴

What's happening in Alabama?

Alabama vs. U.S. Incidence Rates of Acute Hepatitis B and C (2015)⁶



Alabama vs. U.S. Age-Adjusted Liver Cancer* Incidence and Mortality Rates (2010-2014)⁵



Take Action!

Most new liver cancer cases diagnosed each year could be prevented through these strategies:⁴

POLICY, SYSTEMS & **ENVIRONMENTAL (PSE) VACCINATION CHANGE** State- and national-based surveillance 95% of hepatitis B infections Early detection is key. Viral hepatitis is curable, and PSE change leads to broader systems provide essential data for program can be prevented with treatment could prevent impact and sustainability. Identify patients who are at immunization, and promising planning. 90,000 liver cancer deaths by high risk for hepatitis B or Build infrastructure that 2030.8 practices." Use cancer registry data to: hepatitis C infections allows the identification, follow-up and monitoring Identify individuals Test according to age- and Ensure those infected with o Describe disease burden recommended for hepatitis risk-based guidelines of individuals with hepatitis o Identify disease trends to inform hepatitis B or hepatitis C patterns of access to care **B** vaccination Assess for risk factors for receive appropriate care B and hepatitis C infections Use National Notifiable Diseases Administer vaccination as liver cancer, including: and treatment • Work with stakeholders to Surveillance System and Viral Hepatitis Heavy alcohol use part of routine services Partner with insurers to support improvements in Surveillance Program to: Obesity develop solutions to lower research, prevention, Type II diabetes¹ Describe infection of disease cost of treatment screening, diagnosis and o Monitor trends in incidence and care prevalence of risk factors for disease O Follow the CDC Guidelines for Viral Hepatitis Surveillance and Case Management 1

REFERENCES: 1. Centers for Disease Control and Prevention. (2017). <u>Liver Cancer</u>. Retrieved from http://bit.ly/2xmeVg. 2. El-Serag, H.B. & Kanwal, F. (2014). Epidemiology of Heptocellular Carcinoma in the United States: Where Are We? Where Do We Go? <u>Hepatology</u>, 60(5), 1767-1775. doi: 10.1002/hep.27222 3. Centers for Disease Control and Prevention. (n.d.) <u>5-Year Relative Survival by Selected Primary Site, Race, Sex and Age Group</u>, Retrieved from http://bit.ly/2l7tQMIn. **4.** Centers for Disease Control and Prevention and Prevention and National Cancer Institute. (2017). <u>United States Cancer Statistics: 1999-2014 Incidence and Mortality Web-Based Report</u>. Retrieved from http://bit.ly/2in/YIp 6. Centers for Disease Control and Prevention. (2017). <u>Surveillance of Viral Hepatitis: United States - 2015</u>. Retrieved from http://bit.ly/2x02IQ **8**. National Academy of Sciences, Engineering, and Medicine. (2017). <u>A National Strategy for the Elimination of Hepatitis B and C: Phase Two Report</u>. Retrieved from http://bit.ly/2yMQ071

*Refers to cancer that begins in the liver or intrahepatic bile duct.







Control and Prevention.