South Dakota
Viral Hepatitis & Liver Cancer Prevention Profile

Each year in the United States, around 31,000 people get liver cancer.[1] 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?[2] Less than 18% of people diagnosed with any kind of liver cancer live five or more years.[3]
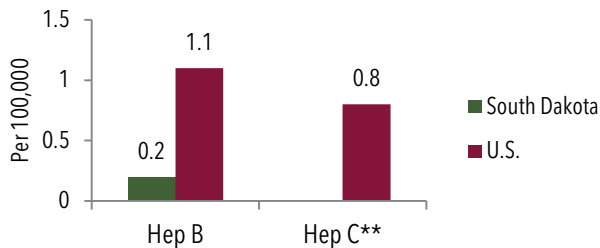
HBV Populations at higher risk of hepatitis B infection include people born in Asia and sub-Saharan Africa, people who inject drugs, incarcerated individuals, men who have sex with men and health care workers at risk of occupational exposure.[4]
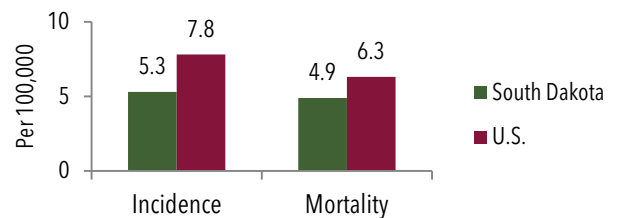
HCV Populations at higher risk of hepatitis C infection include baby boomers (born 1945-1965), those who inject drugs or who have ever injected drugs, individuals with HIV, and prior recipients of transfusions or organ transplants.[4]

What's happening in South Dakota?

South Dakota vs. U.S. Incidence Rates of Acute Hepatitis B and C (2015)[6]

South Dakota 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]

SURVEILLANCE	VACCINATION	SCREENING	TREATMENT	POLICY, SYSTEMS & ENVIRONMENTAL (PSE) CHANGE

State- and national-based surveillance systems provide essential data for program planning.
 	
▪ Use cancer registry data to:
  o Describe disease burden
  o Identify disease trends to inform patterns of access to care
▪ Use National Notifiable Diseases Surveillance System and Viral Hepatitis Surveillance Program to:
  o Describe infection of disease
  o Monitor trends in incidence and prevalence of risk factors for disease
  o Follow the CDC Guidelines for Viral Hepatitis Surveillance and Case Management
	95% of hepatitis B infections can be prevented with immunization, and promising practices.[7]
	
	▪ Identify individuals recommended for hepatitis B vaccination
	▪ Administer vaccination as part of routine services
		Early detection is key.
		
		▪ Identify patients who are at high risk for hepatitis B or hepatitis C infections
		▪ Test according to age- and risk-based guidelines
		▪ Assess for risk factors for liver cancer, including:
		  ▪ Heavy alcohol use
		  ▪ Obesity
		  ▪ Type II diabetes[1]
			Viral hepatitis is curable, and treatment could prevent 90,000 liver cancer deaths by 2030.[8]
			
			▪ Ensure those infected with hepatitis B or hepatitis C receive appropriate care and treatment
			▪ Partner with insurers to develop solutions to lower cost of treatment
				PSE change leads to broader impact and sustainability.
				
				▪ Build infrastructure that allows the identification, follow-up and monitoring of individuals with hepatitis B and hepatitis C infections
				▪ Work with stakeholders to support improvements in research, prevention, screening, diagnosis and care[8]

REFERENCES: 1. Centers for Disease Control and Prevention. (2017). *Liver Cancer*. Retrieved from http://bit.ly/2xmoEVg. **2.** El-Serag, H.B. & Kanwal, F. (2014). Epidemiology of Heptocellular Carcinoma in the United States: Where Are We? Where Do We Go? *Hepatology*, *60*(5), 1767-1775. doi: 10.1002/hep.27222 **3.** Centers for Disease Control and Prevention. (n.d.) *5-Year Relative Survival by Selected Primary Site, Race, Sex and Age Group*. Retrieved from http://bit.ly/2fYqMLn **4.** Centers for Disease Control and Prevention. (2016). *CDC Fact Sheet: Viral Hepatitis and Liver Cancer*. Retrieved from http://bit.ly/2i1K2pv **5.** Centers for Disease Control and Prevention and National Cancer Institute. (2017). *United States Cancer Statistics: 1999-2014 Incidence and Mortality Web-Based Report*. Retrieved from http://bit.ly/2in7YTp **6.** Centers for Disease Control and Prevention. (2017). *Surveillance of Viral Hepatitis- United States - 2015*. Retrieved from http://bit.ly/2z3D4GS **7.** Centers for Disease Control and Prevention. (2017). *Viral Hepatitis: Vaccination of Adults*. Retrieved from http://bit.ly/2xn2iTq **8.** National Academy of Sciences, Engineering, and Medicine. (2017). *A National Strategy for the Elimination of Hepatitis B and C: Phase Two Report*. Retrieved from http://bit.ly/2yMQO7T

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

Learn more about viral hepatitis at www.cdc.gov/hepatitis and more about liver cancer at www.cdc.gov/cancer/liver

For more information, contact: