



JANUARY 19,

# Connections Newsletter (Issue 23-1)

August - September 2023

## AT A GLANCE

This issue covers back-to-school season, publication highlights, mpox microsite, AtlasPlus updates, new report on hepatitis C, STI federal implementation plan 2021-2025, TB skin test infographic, and more.



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## From the director



Jonathan Mermin, MD, MPH (RADM, USPHS)

This back-to-school season is an important time of year for parents and caregivers of students. Helping others build strong bonds and connecting to youth to help [protect their mental health](#) is a priority. Although there [are concerning trends](#) [PDF](#) about the mental health of U.S. high school students, the good news is that teens are resilient, and we know some of what works to support their mental health including [feeling connected to school and family](#).

Check out my recent "X" about helping my own child during this back to school season.

### Follow me on X

Get the latest updates from me and our work at NCHHSTP

@DrMerminCDC

## Publication highlights

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**Kota KK, Hong J, Zelaya C, Riser AP, Rodriguez A, Weller DL, Spicknall IH, Kriss JL, Lee F, Boersma P, Hurley E, Hicks P, Wilkins C, Chesson Conception-Acevedo J, Ellington S, Belay E, Mermin J.** [Racial and ethnic disparities in mpox cases and vaccination among adult males—United States, May–December 2022](#). *MMWR Morb Mortal Wkly Rep* 2023;72(15):398–403. *There were notable disparities in mpox incidence, with higher rates among Black and Hispanic males than White males. While vaccination rates were higher among Black and Hispanic males than White males, they were not high enough to offset the disproportionate incidence.*

**Wilkins NJ, Krause KH, Verlenden JV, Szucs LE, Ussery EN, Allen CT, Stinson J, Michael SL, Ethier KA.** [School connectedness and risk behaviors and experiences among high school students—Youth Risk Behavior Survey, United States, 2021](#). *MMWR Suppl* 2023;72(Suppl-1):21. *During 2021, 61.5% of US high school students reported feeling connected to others at school. School connectedness was associated with lower prevalence of all health risk behaviors and experiences; associations varied across racial and ethnic groups and sexual identities.*

**Raiford JL, Yuan X, Carree T, Beer L.** [Understanding disparities in antiretroviral therapy adherence and sustained viral suppression among Black, Hispanic/Latina, and White women in the United States—Medical Monitoring Project, United States, 2015–2019](#). *J Acquir Immune Defic Sy* 2023. Epub ahead of print. *Data for Black, Hispanic/Latina, and White women with HIV were analyzed. Racial/ethnic disparities in ART adherence and sustained viral suppression were reduced after accounting for social determinants of health. Interventions are needed to improve health equity for women with HIV.*

**You S, Yaesoubi R, Lee K, Li Y, Eppink ST, Hsu KK, Chesson HW, Gift TL, Berruti AA, Salomon JA, Rönn MM.** [Lifetime quality-adjusted life years lost due to genital herpes acquired in the United States in 2018: a mathematical modeling study](#). *Lancet Reg Health Am* 2023;19:100427. *This study examined the health burden of neonatal herpes and adult genital herpes in the United States using quality-adjusted life years lost. Estimates enable comparison of disease burdens across various STIs and other adverse health conditions and can inform health economic studies.*

**Schildknecht KR, Pratt RH, Feng PI, Price SF, Self JL.** [Tuberculosis—United States, 2022](#). *MMWR Morb Mortal Wkly Rep* 2023;72(12):297–303. *Compared with 2021, TB incidence increased slightly during 2022 and was characterized by higher incidence among AI/AN and NH/OPI populations; more cases among non-US-born persons newly arrived in the United States; and lower incidence among persons aged ≥65 years.*

**Montgomery MP, Sizemore L, Wingate H, Thompson WW, Teshale E, Osinubi A, Doshani M, Nelson N, Gupta N, Wester C.** [Development of a standardized, laboratory result-based hepatitis C virus clearance cascade for public health jurisdictions](#). *Public Health Rep* 2023. Epub ahead of print. *Written as a guide for health departments, this paper describes CDC's standardized, population-level, laboratory-based hepatitis C virus (HCV) clearance cascade. HCV clearance cascades are used to track progress toward HCV elimination and identify disparities in access to testing and treatment.*

## New resources

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# MAX YOUR VAX

- Two is better than one.
- Get your **TWO** doses of the mpox vaccine to get maximum protection!

[bit.ly/findmpoxvaccine](https://bit.ly/findmpoxvaccine)



**MPOX**

Max Your Vax Graphic

### Get the Latest on Mpox Right on Your Website!

The mpox outbreak is better, but not over. Vaccination can help limit the spread of the virus. A new way to share reliable and accurate mpox information is by embedding the CDC mpox microsite onto your website. The mpox microsite is a collection of syndicated content that can seamlessly become part of your website's content. The mpox microsite includes the most popular or frequently visited pages. In addition, consider using CDC's latest social media graphics and messages to share information about mpox with your audiences. The messages highlight how important it is to get both doses of the vaccine for maximum protection. For more information about microsites, social media messages, and images please go to [CDC's Public Health Media Library](#).

# Explore CDC's



**HIV • Hepatitis • STD • TB**  
**• Social Determinants of Health Data**

AtlasPlus Logo

## AtlasPlus updates

[NCHHSTP AtlasPlus](#) gives you quick access to nearly 20 years of CDC data on HIV, viral hepatitis, STDs, and TB at the national, regional, state, metropolitan statistical area (MSA), and county levels. Users can also view social and economic data in conjunction with HIV, viral hepatitis, S and TB infections and indicators. Check out "[What's New](#)" on AtlasPlus. Several improvements and data updates have been made since the start of 2023:

- Added 2021 STD diagnosis data at the national, state and county levels.
- Updated 12 National HIV Surveillance System (NHSS) HIV indicators for data through 2021 based on HIV diagnoses reported to CDC through December 2022.
- Added new MSA data for 6 NHSS HIV indicators for 2019–2021.
- Updated preliminary 2022 and 2023 data on HIV diagnoses and 2022 data on linkage to HIV medical care, both at the national, state, regional, and county levels. Data for 2022 and 2023 are considered preliminary (subject to 12-month reporting delay) and include HIV diagnoses reported to CDC through March 2023 and linkage to HIV medical care reported to CDC through December 2022.
- Updated PrEP coverage data based on prescriptions reported through December 2022 at the national, state, and county levels.

## 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 (self or self-pay) in the analysis.

Source: Centers for Disease Control and Prevention.

Diagram showing adults diagnosed and cured of hepatitis C

### New report on Hepatitis C and the investment needed for a transformative national response

Nearly a decade after safe and effective treatments were approved, cures for hepatitis C fail to reach most people in the United States who need them. When untreated, hepatitis C can lead to liver cancer, liver failure, and death. A new CDC report shows that for people diagnosed with hepatitis C between 2013-2021:

- Only 1 in 3 have been cured
- Only 1 in 4 without insurance have been cured
- Only 1 in 4 adults under 40 have been cured

Major barriers to treatment include cost of treatment, restrictive treatment coverage policies, and challenges of diagnosing hepatitis C. The White House has requested \$11 billion for hepatitis C elimination – if approved, these investments will address treatment barriers, save billions in healthcare spending, and save thousands of lives. A transformative national response with a well-funded public health effort is vital to reaching [more than 2 million people](#) with hepatitis and expanding accessible services to prevent new infections. and expanding accessible services to prevent new infections. Read more about my thoughts on the [CDC's Hepatitis C report](#) in the [Dear Colleague Letter](#) and [Media Release](#).

### Get the new Hepatitis C treatment finder

Rates of hepatitis C in the United States continue to rise, while treatment rates remain far too low. To assist those seeking hepatitis C treatment, CDC developed the [Hepatitis C Treatment Locator Widget](#), which helps users find nearby treatment providers. Public health partners can [add this widget](#) to their website, and health organizations and providers that treat hepatitis C can [add their clinic](#) to the database of providers. Hepatitis C is curable. This locator tool is a significant step in helping patients locate lifesaving treatment.

### STI Federal Implementation Plan, 2021-2025

On June 8, after a collaboration with CDC's STD Program and many other partners, the U.S. Department of Health and Human Services (HHS)

released the [Sexually Transmitted Infections \(STI\) Federal Implementation Plan, 2021-2025](#). The Implementation Plan complements the [STI National Strategic Plan](#). Through these plans, HHS and its prevention partners hope to reverse the dramatic rise in STIs in the United States.

**Logged On and At Your Service: Helping STI Programs Master Popular Digital Tools for Improved Health Care Services**

**STD Prevention SUCCESS STORIES**

Sexually transmitted infection (STI) prevention and treatment programs around the country work hard to reach and provide communities with important STI services. But in this era of the tech-savvy, highly-mobile digital consumer—along with [rising STI rates](#)—sometimes health care providers and other health department staff, such as Disease Intervention Specialists (DIS), need a helping hand to grow and strengthen their technical capabilities.

That's where CDC's [Using Technology to](#)

"It's important to speak the 'language' of those you're trying to reach. In the case of modern STI prevention and treatment, that involves the ability to reach disproportionately affected people through the technology they use, such as social networking sites, dating apps, and text," said Rachel Kachur, a Health Scientist in DSTDP and UTASP Co-Lead.

**Aligning technological expertise with local STI health needs**

"We focus on giving practical assistance to public health departments and other CBOs that helps them reach higher levels of service and support to surrounding communities, especially populations most impacted by STIs," said Frank Strona, a Public Health Advisor in DSTDP and the UTASP Lead for Technical Assistance. "Our specialty is providing instruction and insight to help understand and master the latest, most frequently used digital technologies, such as popular dating apps, to reach those most at risk of STI and HIV infection. For example, our [mobile app simulator](#), available on the UTASP website, was designed to familiarize DIS with all aspects of modern app navigation to help improve contact tracing and partner services on dating apps. It's

in cities from coast to coast, and across US territories. They also hosted a number of webinars, trainings, and workshops for national and international science and public health professional audiences—all while most members served a leadership roles during recent COVID-19 and upon national public health emergencies.

While acknowledging the large amount of time and resource commitments that come with most UTASP projects, both Kachur and Strona agree that having a broad reach is a source of pride for the workgroup because of the positive change that happens in communities when they help programs sharpen their technological skills.

"It all comes down to ethics," said Strona. "With STI rates steadily rising, local public health departments and other CBOs that deliver modern, targeted health care services will be better positioned to meet communities where they are. We too that not offering the guidance that changes these programs, preventing them from having more success in decreasing rates for STI and HIV infection. It's a fundamental part of the IT process—fulfilling an obligation to help programs reach their full potential in community care and outreach?"

Learn more about UTASP members like Sam Dwyer Collins, MD, MPH on the blog

For more information or if interested in starting your support with UTASP, please email us at [info@utasp.org](#)

STD Prevention Success Stories Infographic

### UTASP workgroup helps partners improve their digital reach

The latest *STI Prevention Success Story*, [Logged On and At Your Service](#) [PDF](#), highlights the Using Technology to Advance STI Prevention (UTASP) workgroup. The UTASP workgroup provides health departments and other sexual health programs with the technical assistance needed to communicate effectively with consumers in popular digital spaces like dating apps. Through their efforts, the workgroup is helping communities improve STI treatment and prevention outcomes. To learn more, visit [STD Prevention Success Stories!](#)

## What You Need to Know About the TB Skin Test

Getting tested and treated for tuberculosis (TB) can protect yourself, your family and friends, and your community. There are two types of tests for TB infection: the TB blood test and the TB skin test. This fact sheet provides information on the TB skin test.

### TB Skin Test

The TB skin test, also known as the tuberculin skin test, may be used to find out if you are infected with TB germs. A health care worker will use a small needle to inject testing fluid (called tuberculin) under the skin on the lower part of your inner arm.

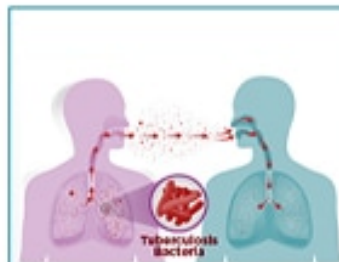


### After Receiving the TB Skin Test



After the test, you should avoid using bandages, putting on lotion, or scratching the test area because it may affect the results. You can wash the area with water, but do not wipe or scrub. If the area itches, put an ice cube or cold cloth on it.

After 2 or 3 days, you must return to have a health care worker read your skin test. You may have swelling or a bump where the testing fluid was injected. The health care worker will measure the bump or swelling and will tell you if your skin test reaction is positive or negative.



TB germs spread through the air from one person to another. Anyone can get TB. TB germs usually attack the lungs but can move to any part of your body.

The bacteria responsible for causing TB can live in the body for years without symptoms. This is called latent TB infection or inactive TB. People with inactive TB do not have symptoms.

**If your TB skin test is NEGATIVE:**

- Your body did not react to the test. You likely do not have inactive TB or active TB disease.
- You may need to have more tests if:
  - You have symptoms of active TB disease, like coughing, chest pain, fever, weight loss, or tiredness.
  - You have HIV infection.
  - Your exposure to TB germs was recent. You may need a second skin test 8 to 10 weeks after the last time you spent time with someone with active TB disease. This is because it can take several weeks after infection for your immune system to react to the TB skin test. If your reaction to the second test is negative, you likely do not have inactive TB or active TB disease.

**(BCG) Vaccine?**

not widely used in the United States. Most states have received the BCG TB vaccine.

in other countries where TB is more common, people often get TB from TB germs that go away as people get older.

if you were previously vaccinated

even if they are not infected with TB BCG vaccination. Therefore, TB blood tests.

TB Skin Test Infographic

### Updated CDC TB skin test fact sheet

Check out CDC's Tuberculosis Elimination program's updated "[What You Need to Know About TB Skin Test](#) [PDF](#)" fact sheet. Healthcare providers and TB programs can use this fact sheet to educate people about TB skin testing and the importance of getting tested for TB disease. To download visit the [CDC website](#).

## Current events

### Maine declared an end to hepatitis A outbreak

Since 2016, 37 states have reported hepatitis A outbreaks associated with person-to-person transmission. As of June 2023, Maine has declared an end to their outbreak, bringing the total number of states that have declared ends to their outbreaks to 33, with 4 states reporting ongoing outbreaks. CDC continues to provide technical assistance to jurisdictions requesting it.

### EHE website launched!

An updated and streamlined website for the *Ending the HIV Epidemic in the U.S.* (EHE) initiative was recently launched. Designed to reach policymakers, grantees, and current and future partners, the concept for the updated website was developed collaboratively with both internal and external partners involved in the EHE initiative. The new organization of the EHE website includes sections about EHE, information on EHE progress and success stories, and resources for partners and grantees. Be sure to see the [updated website](#).

To get the latest news and announcements from our Center, check out the [NCHHSTP newsroom](#).

### Observances and events

[National HIV/AIDS and Aging Awareness Day is September 18](#)

A Case Study: Social Media at CDC a Health Literacy Training Webinar is September 22. [Register today](#).



## Contribute to Connections

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### Submit your Connections content

Do you have feedback, story ideas, content you would like to see in the newsletter? Share them with our Editor-In-Chief, Lauren M. Stough

Email us

## Learn more about our work

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