Centers for Disease Control and Prevention
MMWR
Morbidity and Mortality Weekly Report
Weekly / Vol. 64 / No. 17
May 8, 2015

Hepatitis Awareness Month and National Hepatitis Testing Day — May 2015

This month marks the 20th anniversary of Hepatitis Awareness Month and the 4th National Hepatitis Testing Day (May 19) in the United States. Although care and treatment can be life-saving, many of the 3 million persons estimated to be living with hepatitis C virus (HCV) infection are unaware of their infection and are not receiving preventive services and medical management. In addition, an emerging epidemic of HCV infection among a new demographic of persons who inject drugs is unfolding in several areas throughout the nation. Guided by the goals of the 2014 U.S. Department of Health and Human Services *Action Plan for the Prevention, Care, and Treatment of Viral Hepatitis* (*1*), CDC continues its activities to expand access to HCV testing, care, and treatment to stem morbidity and mortality, and to reduce HCV infections caused by drug use behaviors. Efforts to address each of these strategic imperatives are highlighted by the two reports in this issue of *MMWR*.

The first report shows that trends in new cases of HCV infection are highly correlated with trends in substance abuse treatment admissions for opioid dependency and opioid injection in four states in the central Appalachian Region. The second report describes strategies for integrating HCV testing into primary care settings. These reports demonstrate how data can be used to identify patterns of risk for HCV transmission among persons who inject drugs and how programs can be successfully implemented to identify persons disproportionately affected by HCV infection and ensure they receive appropriate medical care and treatment.

Reference

1. US Department of Health and Human Services. Combating the silent epidemic of viral hepatitis: action plan for the prevention, care, and treatment of viral hepatitis. Updated 2014–2016. Washington, DC: US Department of Health and Human Services; 2015. Available at http://aids.gov/pdf/viral-hepatitis-action-plan.pdf.

Increases in Hepatitis C Virus Infection Related to Injection Drug Use Among Persons Aged ≤30 Years — Kentucky, Tennessee, Virginia, and West Virginia, 2006–2012

Jon E. Zibbell, PhD[1], Kashif Iqbal, MPH[1], Rajiv C. Patel, MPH[1], Anil Suryaprasad, MD[1], Kathy J. Sanders, MSN[2], Loretta Moore-Moravian[3], Jamie Serrecchia, MPA[4], Steven Blankenship, MS[5], John W. Ward, MD[1], Deborah Holtzman, PhD[1] (Author affiliations at end of text)

Hepatitis C virus (HCV) infection is the most common blood-borne infection in the United States, with approximately three million persons living with current infection (*1*). Percutaneous exposure to contaminated blood is the most efficient mode of transmission, and in the United States, injection drug use (IDU) is the primary risk factor for infection. State surveillance reports from the period 2006–2012 reveal a nationwide increase in reported cases of acute HCV infection, with the largest increases occurring east of the Mississippi River, particularly among states in central Appalachia (*2*).

INSIDE

Continuing Education examination available at http://www.cdc.gov/mmwr/cme/conted_info.html#weekly.

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