

Health-e Bytes™

An eNewsletter published by Hepatitis Foundation International

Vol. 2, No 2 • May-June 2014

Dear Friends,

As the Foundation transitions, it is with gratitude we acknowledge HFI's Founder, Thelma King Thiel, whose recent retirement (see [press release](#)) does not go unnoticed by the liver community for the fertile ground she laid in the 43 years she has worked on the issues of hepatitis and liver disease.

Although the "Liver Lady" can never be replaced, HFI continues to carry on our mission with the same tireless dedication for the patients, families and communities in the U.S. and worldwide who suffer from liver disease.

In collaboration with the Foundation's newly appointed Board Chair, Karen Wirth, a leading patient advocate and an engaged constituent community, HFI is expanding our educational, advocacy, research and testing initiatives for greater impact and expanded reach into the communities nationwide and globally. We look forward to your continued support and feedback to ceo@hepatitisfoundation.org.

Here's to your best health!

Ivonne Perlaza Fuller, CEO
Hepatitis Foundation International



**Gilead's HCV
Treatment on
VA's Approved
List of
Medicines**

[Read More...](#)

Inside Health-e Bytes...

T.I.P.S... HFI in the Know...
Lifestyle... Grand Rounds...

[Read More...](#)

**Hepatitis C Cure
Within Range**

[Read More...](#)



**HFI Publishes
Advocacy Alert**

[Read More...](#)



National Hepatitis Testing Day – May 19, 2014

In observance of May's Hepatitis Awareness Month, the Hepatitis Foundation International in collaboration with public health officials are calling all U.S. baby boomers – the generation born from 1945 through 1965 – to get a onetime test for the hepatitis C virus. Viral hepatitis is a leading infectious cause of death in the U.S. The US Centers for Disease Control and Prevention (CDC) observes National Hepatitis Awareness Month every May and National Hepatitis Testing Day each May 19th.

[Click here](#) to locate testing sites near you.

May 19 is National Hepatitis Testing Day.

Please join Honorary Hosts

- | | | |
|-----------------------------|-------------------------------|------------------------------------|
| Hon. Corrine Brown (FL-05) | Hon. Marcia L. Fudge (OH-11) | Hon. James P. Moran (VA-08) |
| Hon. Benjamin Cardin (MD) | Hon. Mike M. Honda (CA-17) | Hon. Lucille Roybal-Allard (CA-40) |
| Hon. Bill Cassidy (LA-06) | Hon. Hank C. Johnson (CA-04) | Hon. Dennis A. Ross (FL-15) |
| Hon. Steve Cohen (TN-09) | Hon. Tom Latham (IA-03) | Hon. Adam B. Schiff (CA-28) |
| Hon. Gerry Connolly (VA-11) | Hon. Barbara Lee (CA-13) | Hon. Mark Takano (CA-41) |
| Hon. Charlie Dent (PA-15) | Hon. Stephen F. Lynch (MA-08) | Hon. Paul D. Tonko (NY-20) |
| Hon. Chaka Fattah (PA-02) | Hon. Mike McIntyre (NC-07) | Hon. Henry A. Waxman (CA-33) |
| Hon. Bill Flores (TX-17) | Hon. Barbara A. Mikulski (MD) | Hon. Brad Wenstrup (OH-02) |

at the

2014 Congressional Viral Hepatitis Screening & Reception

Monday, May 19, 2014

5:00 pm – 7:00 pm

Cannon Caucus

Cannon House Office Building, Washington, DC 20515

Free, on-site Hepatitis B & C screenings

Co-hosted by:



For more information and to RSVP, please contact Amy Paridy at events@epiphanyproductions.com or 703-683-7500.

Health-e Bytes

May-June 2014

Contents...

HFI In The Know	3
<i>Summits, Events, Health Observances</i>	
Lifestyle	4-5
<i>Diverse Health Issues</i>	
Grand Rounds.....	6
<i>Science, Research and Medical Updates</i>	
In The Pipeline	7
<i>Clinical Trials and New Drugs</i>	
Advocacy Alert	8
<i>National Testing Day</i>	
Helping Hands	9
<i>HFI's Fundraising Appeal Activities</i>	
There's An App for That	9
<i>Health Information for your Mobile Phone and Tablets</i>	
T.I.P.S.	9
<i>Free Resources</i>	



Health-e Bytes™

Vol 2. NO.2 • ©2014

Published by
Hepatitis
Foundation
International

Editor:
Ivonne Fuller, CEO
Assistant Editor:
Susan Thiel

Writers:
Jennifer Armah,
Cheryl Dukes

1955 Briggs Chaney Road,
Silver Spring, MD 20905

800-891-0707

info@hepatitisfoundation.org
www.hepatitisfoundation.org



HFI in the Know...

National Health Observances

May 2014

- Arthritis Awareness Month
- Better Hearing and Speech Month
- Healthy Vision Month
- Hepatitis Awareness Month
- Melanoma/Skin Cancer Detection and Prevention Month®
- Mental Health Month
- National Asthma and Allergy Awareness Month
- National Celiac Disease Awareness Month
- National Mediterranean Diet Month
- National Osteoporosis Awareness and Prevention Month
- National Physical Fitness and Sports Month
- UV Safety Month
- 4 - 10 Children's Mental Health Awareness Week
- 4 - 10 North American Occupational Safety and Health Week
- 11 - 17 Food Allergy Awareness Week
- 11 - 17 National Women's Health Week
- 12 - 18 National Stuttering Awareness Week
- 12 - 16 National Alcohol- and Other Drug-Related Birth Defects Awareness Week
- 7 National Bike to School Day
- 12 National Women's Check-up Day
- 18 HIV Vaccine Awareness Day
- 19 National Asian and Pacific Islander HIV/AIDS Awareness Day
- 28 National Senior Health & Fitness Day®
- 31 World No Tobacco Day

- Myasthenia Gravis Awareness Month
- National Aphasia Awareness Month
- National Congenital Cytomegalovirus Awareness Month
- National Safety Month
- National Scleroderma Awareness Month
- 9 - 15 Men's Health Week
- 22 - 28 National Lightning Safety Awareness Week
- 1 National Cancer Survivors Day
- 19 World Sickle Cell Day

June 2014

- Fireworks Safety Month
- Cataract Awareness Month
- Men's Health Month

FIND OUT IF YOU HAVE HEPATITIS C
IT COULD SAVE YOUR LIFE

BORN FROM 1945-1965?

SOME PEOPLE DON'T KNOW HOW OR WHEN THEY WERE INFECTED

People born from 1945-1965 are **5X MORE LIKELY TO BE INFECTED WITH HEPATITIS C**

3 OUT OF EVERY 4 people with Hepatitis C were born between these years

Up to **75%** of people living with Hepatitis C **DO NOT KNOW THEY ARE INFECTED**

Many people can live with **HEPATITIS C** for **DECADES** WITH **NO SYMPTOMS**

HEP C Blood Test

CDC recommends anyone born from 1945-1965 GET TESTED



Lifestyle...

Department of Health and Human Services Updates Viral Hepatitis Action Plan

The US Departments of Health and Human Services (HHS), Housing and Urban Development, Department of Justice, and Veterans Affairs recently extended an action plan originally drafted in 2011 for the prevention, care and treatment of viral hepatitis. Government health officials look to increase hepatitis C awareness and decrease the number of new cases as part of the updated action plan to combat

viral hepatitis. The Plan includes a number of goals to achieve by the end of the decade for research, education, treatment, and prevention of viral hepatitis. Federal agencies agreed to renew the plan for another 3 years given the Affordable Care Act's expanded access to viral hepatitis prevention, diagnosis, care, and treatment and new developments in medications for hepatitis C.

Alcohol Fuels Liver Disease in Those With HIV and Hepatitis C

People infected with both HIV and hepatitis C are much more likely to develop advanced liver disease if they drink any alcohol at all, according to a new study. Researchers analyzed data from thousands of participants in a Veterans Affairs study on aging and found the risk of advanced liver fibrosis increased overall with alcohol use but was especially striking in patients with both HIV and hepatitis C (co-infected patients).

Among study participants who were light drinkers, co-infected patients were 13 times more likely than non-infected people to have advanced liver fibrosis. Participants who were heavy drinkers and co-infected patients, were 21 times more likely than non-infected people to have advanced liver fibrosis.

"The difference between co-infected and uninfected groups was stark. Given the prevalence of drinking in co-infected individuals, it is important to determine the patterns of alcohol use, such as nonhazardous drinking and even binge drinking, which are not traditionally thought to contribute to liver fibrosis," stated senior author Dr. Vincent Lo Re III, an infectious disease physician at the Veteran Affairs Medical Center in Philadelphia and an Assistant Professor of Medicine and Epidemiology at the University of Pennsylvania's Perelman School of Medicine.

Study findings further highlight the need for health care providers to counsel co-infected patients to reduce alcohol consumption. Highlighting the risks on alcohol consumption may increase awareness so patients reduce drinking or quit altogether and avoid advanced liver disease.

An estimated 45% of people who are infected with hepatitis C know they have the disease and one of the Plan's goals is to increase that proportion to 66% by 2020 through more screening efforts and disease awareness initiatives. Overall, more than 150 proposed items are slated for action between 2014 and 2016 among 14 federal agencies or offices. In addition, the Plan calls for involvement and innovation from a broad mix of both the private and public sector. The Action Plan for the Prevention, Care and Treatment of Viral Hepatitis (2014-2016) is [available online](#).



Lifestyle...

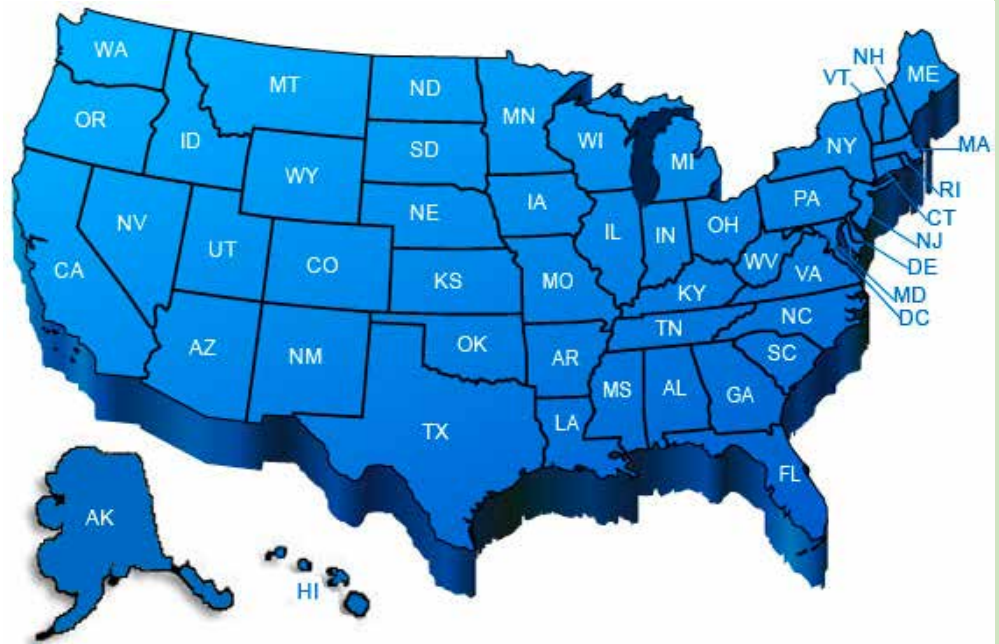
Hepatitis Coordinators Nationwide

Every state's health department has a Hepatitis Coordinator appointed by the Centers for Disease Control and Prevention to help coordinate activities, prevention and services for hepatitis A, hepatitis B and hepatitis C. These coordinators are the critical link between state and local health departments and the CDC. Under CDC's guidance, these individuals manage programs to prevent, monitor, and control viral hepatitis.

As the designated hepatitis program experts for their state, coordinators and their staff work with

organizations and individuals on all levels of viral hepatitis prevention. Their work reaches hospitals, physicians, STD clinics and drug treatment centers locally. They ensure that education and counseling of viral hepatitis prevention is provided to communities and individuals. They can answer questions and offer information about state and local resources.

Please contact your state Hepatitis Coordinator for more information about the services provided in your state. [Click here](#) for a list of Hepatitis Coordinators and their contact information.



Free Hepatitis B Screening for Women under the ACA



The Affordable Care Act (ACA) mandates that new insurance plans provide 19 free, preventive health services for women. In the past, many health plans covered some or all of these services, but they often required cost sharing or copays. With the implementation of the ACA, if the provider in your network administers these services -- they are free of charge. They do not incur copays or coinsurance, and are free whether or not the annual deductible is met. However, some screenings do have eligibility requirements based on age or certain conditions such as pregnancy.

Like most other prenatal tests, hepatitis B screening is covered. Hepatitis B can be passed on to your child during birth. If you're a pregnant woman with hepatitis B, your baby will be provided two shots soon after birth to prevent him or her from acquiring hepatitis B. [Click here](#) to see the list of the free, preventative services.



Grand Rounds...



Study Finds Doctors More Likely to Treat Hepatitis B in Men Than Women

A Stanford University-Pacific Health Foundation study followed 862 hepatitis B patients (53% were male, with an average age of 42 years) over a 12-month period, most of whom qualified for treatment due to liver damage. However, only 46% were treated and men were more likely to be treated than women, even though both qualified for treatment under current medical guidelines. According to the report, 95 were seen by primary care doctors, 566 went to community gastroenterology clinics, and 201 were seen by university hepatologists. Men and patients over age 50 were more likely to be treated than women and younger patients.

"Further studies are needed to examine potential causes for the observed gender disparity and to improve access to antiviral therapy in different care settings," the researchers wrote.

Will Liver Biopsy Become an Endangered Procedure?

Dr. Nezam Afdhal, Professor of Medicine, Harvard Medical School, Chief of Hepatology, Beth Israel Deaconess Medical Center in Boston, MA discussed the changing needs and technologies to assess liver damage at the Digestive Disease Week's AASLD State-of-the-Art lecture.

Liver biopsies were important diagnostic and prognostic procedures when clinicians were looking for reasons not to use interferon based therapies due to interferon's side effects. As more effective and tolerable therapies have appeared, the need to stage (rate) fibrosis has diminished. As the need for biopsies declined, new options to assess liver fibrosis appeared. Serum biomarkers offer a simple, reliable and generally inexpensive assessment. Noninvasive devices such as the FibroScan® and imaging techniques including magnetic resonance elastography and acoustic radiation force impulse can reliably assess fibrosis with fewer concerns about the potential effects associated with biopsy.

"Special" Populations of HCV Patients May Be History

Dr. Nancy S. Reau offered an intriguing concept at the May 2014, Digestive Diseases Week conference. "Special populations are no longer special," said Reau, from University of Chicago and HCV Next Editorial Board member. "Sorry, you don't get to have special privileges anymore – you're just as generic as the rest of us."

With the onset of new treatment medications coming down the pipeline, as well as those recently made available, hard to treat patients are less difficult, less "special" and more likely to respond successfully – just like the generic, no complications population HCV patients. Citing results from numerous ongoing studies, Dr. Reau noted that cirrhotic patients, decompensated cirrhosis patients, and pre-transplant, HIV patients are being treated with success in a variety of different trials. She added that despite these increasingly promising findings, further research is always needed.

Approval of Newer, More Effective Hepatitis C Drugs Means a Cure Is Within Reach

Within the next 2 years, treatments for hepatitis C (HCV) with 95% cure rates that are all-oral, interferon free, and effective over 12 weeks or less with negligible side effects will be readily available believes Donald Jensen, MD, FACP, Professor of Medicine, Director for the Center for Liver Disease, University of Chicago Medicine. "I think it is incumbent on us with our patients to use the word 'cure.' There's certainly good data that patients remain virus-undetectable over time... Even cirrhosis has been shown to improve in many of these patients. I think we do a great disservice to our patients in the field if we don't use the word 'cure'."

The progress comes in the sudden onset of drugs clinicians have available to use in fighting HCV. Combining drugs from different classes has led to increased efficacy and diminished viral resistance.

In late 2013, the Food and Drug Administration approved two drugs – simeprevir and sofosbuvir, which paved the way for interferon-free treatment. Treatment with these drugs could be shortened to 12 weeks instead of 24 and patients tolerance for these treatments are high.



In the Pipeline...

Gilead's HCV Treatment on VA's Approved List of Medicines

The U.S. Department of Veterans Affairs (VA) formulary decision to include Gilead's treatment, Sovaldi, comes on the heels of a panel assembled by the system last month. The panel recommended physicians triage hepatitis C patients, treating those first with advanced liver disease first. By warehousing patients, health care providers can absorb the patient load — and Sovaldi's cost — over 10 to 15 years, proposed Gilead President John Milligan. The strategy allows those lower-risk patients to receive next-generation treatments under development by Gilead and others.

The treatment strategy is similar to that pursued by the VA in the early days of antiretroviral drugs developed by Gilead to treat the AIDS virus, Milligan said. It is difficult for the VA to treat hepatitis C patients with interferon because many patients can't tolerate the protein even for the 12 weeks it is used in combination with Sovaldi and ribavirin, Milligan said. Those side effects are so severe that some patients stop treatment. Sovaldi is designed to block a specific enzyme of the virus that causes hepatitis C. The VA is the largest provider of HepC care in the U.S.

Triple Antiviral Therapy Achieves Near 100% Response in Patients with HCV Genotype 4

An all-oral, ribavirin-free, interferon-free combination of three direct-acting antiviral agents that had achieved sustained virologic response (SVR) in 92% of patients with chronic Hepatitis C genotype 1 infection has demonstrated even greater response in patients with genotype 4 infection.

Novira Hep B Drug in Phase 1a Clinical Trial

Novira Therapeutics Inc., a privately held biopharmaceutical company developing novel therapies for the treatment of chronic hepatitis B virus (HBV) initiated a Phase 1a clinical study of NVR-1221. The Phase 1a clinical study is designed to assess the pharmacokinetic profile and dose-related safety and tolerability of NVR-1221 in healthy volunteers. Christian Schade, CEO at Novira said, "We look forward to completing this Phase 1a trial over the coming months and commencing a Phase 1b clinical study to test NVR-1221 in chronic HBV patients as mono-therapy and in combination with approved agents."



Training Programs for Primary Care Providers Yield Positive Benefits for Patients

According to the Morbidity and Mortality Weekly Report, programs to train primary care physicians resulted in double the number of patients that received treatment for hepatitis C (HCV) infections. These programs were implemented by the Centers for Disease Control and Prevention September 2012 and modeled after the Extension for Community Healthcare Outcomes (Project ECHO). Project ECHO utilized case based learning as well as videoconferencing for improved primary care capacity in rural and underserved populations.

From Sept. 30, 2012, to Feb. 28, 2014, 66 primary care physicians with the majority 93% having no experience with HCV. These clinicians were trained on HCV diagnosis and management in person and participated in weekly "teleECHO" clinic sessions to present their HCV patient information to monitor their treatment with specialists including a hepatologist.

During the program period, 280 unique cases of HCV were presented primarily among U.S. born, white baby boomers with a history of injection drug use in 41.4% of the patients. Among the 280 patients, 129 (46.1%) started HCV treatment, mostly with an interferon-based regimen. According to the report, the percentage of people starting treatment was more than double the number starting treatment in a recent CDC study.

Researchers noted HCV antiviral treatment can be safely and effectively delivered by primary care physicians with training and supervision by specialist. Through these type of collaborations providers can incorporate new treatments for HCV to improve access and reduce barriers to treatment.



Advocacy Alert...

We Need You To Help Support National Viral Hepatitis Testing Day!



Hepatitis Awareness Month and National Hepatitis Testing Day are important events that raise awareness about hepatitis B and C and encourage persons at risk to get tested and have access to treatment and care. This is also a good opportunity to talk to your elected officials about the need for funding and legislation to help win the battle against viral hepatitis.

You can make a difference and call your Members of Congress during the month of May and especially on **May 19th National Hepatitis Testing Day** and ask them to take action on the following two items:

- Federal funding for viral hepatitis services is far below what is needed to provide adequate hepatitis B (HBV) and C (HCV) testing, awareness and access to care. Call your U.S. House Representative and U.S. Senators to urge them to support

\$47.8 million in funding for viral hepatitis in the 2015 appropriation bill. At a minimum \$47.8 million is needed for Centers for Disease Control and Prevention, Division of Viral Hepatitis for Fiscal Year 2015.

- The Viral Hepatitis Testing Act (H.R. 2723) is a bipartisan bill pending in Congress. This Bill would authorize \$80 million over 3 years for HBV and HCV testing as well as access to healthcare services. Call your U.S. House Representative member to urge co-sponsorship of H.R. 2723.

When calling your elected officials, tell them why viral hepatitis is important to you, your family or community. This helps elected officials be responsive and understand the importance of their votes and actions for their constituents.

To reach your Members of Congress call the Capitol Switchboard, (202) 224-3121. Should you need assistance contact HFI at advocacy@hepatitisfoundation.org or call **(800) 891-0707**.



Helping Hands

HFI continues to need your support to reach patients, families and communities nationwide. Consider making a contribution today at **DONATE NOW** as we continue to work toward the eradication of Hepatitis C and address liver disease.



THERE'S AN APP FOR THAT:

Mobile apps for smartphones and tablets are changing the way patients and healthcare providers approach health. Growing numbers within the medical profession are embracing social media for sharing helpful medical information and providing patient care.

The **IMS Institute for Healthcare Informatics** analyzes 40,000+ healthcare apps available for download. Preventative Lifestyle patient apps can be found [online](#).

T.I.P.S.

- The **Patient Access Network (PAN) Foundation** is an independent 501(c)(3) organization dedicated to providing help and hope to people with chronic or life-threatening illnesses for whom cost limits access to breakthrough medical treatments Applications are available for new and renewal **HBV** and **HCV** patients.
- **CDC Prevention of HIV/AIDS, Viral Hepatitis, STDs and TB** through Health Care CDC's National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention's (NCHHSTP's) Prevention Through Health Care focus area develops, implements, and evaluates policies and practices that leverage the health care system to help prevent HIV/AIDS, viral hepatitis, STD, and TB infections.