Dear Friends,

As we celebrate our twenty year anniversary during November and the remainder of 2014, it is with gratitude for your support that we look toward a bright future. Hepatitis Foundation International (HFI) is poised to enter our third decade of service as we move closer to the eradication of Hepatitis C (HCV). However, HFI recognizes we have much more work ahead of us as we continue to expand our mission, programs, resources and services.

In this vaccines special edition issue, we examine some of the emerging trends and diseases that continue to affect our families, friends and communities. Despite these challenges, during our next decade HFI will continue to carry out our mission with the same tireless dedication for its patients, families, healthcare providers and communities in the U.S. and globally. Please follow us across social media (Twitter and Facebook) and on our website www.HepatitisFoundation.org as we launch special campaigns to increase our capacity.

As we continue to expand, Crowdrise and Giving Tuesday are just two of the ways to support HFI’s work during this season of celebration and thanksgiving. We look forward to your continued support and feedback to ceo@hepatitisfoundation.org with your recommendations and requests for service. Here’s to your best health!

Ivonne Fuller Cameron, CEO
Hepatitis Foundation International

Flu or Ebola?

Read More...

Inside Health-e Bytes...

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

Read More...

Stakeholders' Meeting

Read More...

HFI 2015-15 Viral
Hepatitis Summits

Read More...
Hepatitis Stakeholders Consensus Meeting

Closing the Gap on Racial and Ethnic Hepatitis Disparities

On September 12-14, 2014, the Hepatitis Foundation International (HFI) held the National Stakeholders’ Consensus Meeting entitled “Closing the Gap on Racial and Ethnic Viral Hepatitis Disparities” (Stakeholders’ Meeting). The objective of this Stakeholders’ Meeting was to assess unaddressed needs in the “war” against viral hepatitis by addressing racial and ethnic disparities while building upon the goals of the 2011 and 2014 HHS Viral Hepatitis Action Plan.

This Stakeholders’ Meeting was attended by hepatitis patient advocacy groups and other thought leaders who have extensive knowledge and experience across the hepatitides and a commitment to patient advocacy and policy on a national level.

The stakeholders discussed and analyzed how viral hepatitis disproportionately impacts communities and devised policy recommendations, key messages, and initiatives that can addend and complement existing strategies to reduce the disparate burden of hepatitis.

The outcome of the HFI 2014 Stakeholders’ Meeting includes sound recommendations that can serve as a guide for education, advocacy and engagement efforts by stakeholder groups throughout the United States. Moving forward, these recommendations may be used by the Stakeholder group for inclusion in their programs, services, health policy, advocacy, research and educational awareness initiatives. Learn more...
HEALTH OBSERVANCES

November 2014

- American Diabetes Month
- COPD Awareness Month
- Diabetic Eye Disease Month
- Lung Cancer Awareness Month
- National Alzheimer’s Disease Awareness Month
- National Family Caregivers Month
- National Stomach Cancer Awareness Month
- 3 - 7 Drowsy Driving Prevention Week
- 14 Hepatitis Foundation International 20th Anniversary
- 17 - 21 Contact Lens Health Week
- 20 Great American Smokeout
- 22 International Survivors of Suicide Day
- 27 National Family Health History Day

VIRAL HEPATITIS SUMMITS

The Hepatitis Foundation International announces one day Summits for healthcare professionals and others working with those affected by or infected with viral hepatitis.

*Continuing education credits* available for:

- Physicians • Physician Assistants • Nurses
- Certified Health Education Specialists (CHES)
- Substance Abuse and Addictions Counselors
- Certified Public Health Professionals (CPH)
- Pharmacists • Social Workers

NEW JERSEY VIRAL HEPATITIS SUMMIT

NOVEMBER 20, 2014 • ISELIN, NJ

Additional details • Register Now!

Contact HFI at 1-800-891-0707 or email summits@hepatitisfoundation.org for more details.

*Not all continuing education credit categories are available at all summit conferences; Complete list available is in Summit detail forms.
### Lifestyle...

**Vaccines - Calling The Shots**

Diseases that were largely eradicated in the United States a generation ago – whooping cough, measles, mumps – are returning, partly because caregivers are skipping and forgetting their children’s shots. “Calling the Shots” takes viewers around the world to track epidemics, explore the science behind vaccinations, hear from parents wrestling with vaccine-related questions, and shed light on the risks of opting out. Examine the science behind vaccinations, the return of preventable disease and the risks of opting out. [View this video now.](#)

### Why is Whooping Cough Coming Back?

Until recently, pertussis was a disease of the past. Modern vaccinations nearly eliminated it, but the stubborn disease, commonly known as whooping cough, has reemerged in recent years. Now, in an attempt to control the outbreak, doctors and health officials urge susceptible people to get booster shots.

Pertussis (a.k.a whooping cough) is a highly contagious, potentially fatal disease characterized by violent coughing attacks that make it difficult to breathe. Patients often make a “whooping” noise as they gasp for air, giving the disease its nickname. Whooping cough is particularly severe in infants and young children as the disease can quickly escalate into pneumonia and other lung infections. Since early whooping cough symptoms resemble those of the common cold, babies often catch the disease from family members who aren’t aware they have it.

The number of whooping cough cases surged to nearly 50,000 in 2012, the highest level the United States has seen since the 1950s. From January 1 – June 16, 2014, nearly 10,000 cases of whooping cough (which is a 25% increase from the previous year) were reported to the CDC. Whooping cough’s comeback can be attributed to a combination of causes, such as low vaccination rates and the emergence of vaccine-resistant mutant strains of the bacteria.

Protecting a community against pertussis requires that at least 92% of the population be immune. Given the complexities of waning immunity, maintaining that threshold to achieve “herd immunity” is more critical than ever—especially to protect infants, who are the segment of the population most vulnerable to the disease.

### Flu Shots

Health officials announced that fewer than half of Americans are being vaccinated against the flu, which kills an average of more than 30,000 people a year. In spite of these risks, per the CDC, only 46% of Americans got flu shots last year.

The CDC recommends a flu shot for everyone over 6 months of age. People have more flu shot options this year than ever. In addition to nasal sprays, which are available to people ages 2 to 49, there is a new “needle-free” flu shot that uses a jet to force flu vaccine through the skin, rather than a needle.

For the first time, the CDC recommends that children between the age of 2 to 8 years receive a live, intranasal flu vaccine, instead of the traditional shot, as evidence shows that intranasal flu vaccine is more effective for these ages. Flu shots are vital for children. About 90% of children who died from the flu were unvaccinated, according to the CDC.

Another new recommendation by the CDC is for senior citizens. This recommendation is to get a second type of vaccine against pneumococcus, a bacteria that can cause pneumonia and which hospitalizes about 50,000 Americans a year. Anyone of age 65 years and over should get a one-time vaccination with the combination pneumococcal vaccine called Prevnar 13, which protects against 13 strains of the bacteria, said CDC’s Director, Thomas Frieden. Seniors need to get these vaccines just once — not every year — but should get the shots about six months apart to increase their effectiveness.
The management of patients with liver disease has changed dramatically in the last 25 years, leading to improved outcomes and survival. Instances of prevention of the onset of liver disease have also increased as hepatitis A and B vaccines have reduced the incidence of acute viral hepatitis. In fact, hepatitis B vaccines have not only resulted in a decline in the rate of chronic hepatitis B, but have, despite the absence of a specific hepatitis D vaccine, also caused a marked decrease in hepatitis D infections in the United States. A hepatitis E vaccine, which is currently awaiting FDA approval, may also become available in the future. This is going to be an important development since acute hepatitis E is associated with high case fatality rates in pregnant women and chronic hepatitis E has been reported in liver, kidney, and pancreas transplant recipients.

However, despite these advances, a hepatitis C vaccine has still not been achieved and chronic liver disease continues to be a prevalent health problem in the United States.

Data suggest that the prevalence of hepatitis A infection is higher in patients with chronic liver disease than in the general population. Furthermore, in case of patients with chronic liver disease or recipients of liver transplants, susceptibility to certain other acute diseases may be higher and as a result, the superimposition of such acute disease (like hepatitis virus superinfection, influenza, and pneumococcal infection) may result in higher morbidity and mortality than in individuals without pre-existing liver disease.

Who should get hepatitis B vaccine?

- Everyone 0–18 years of age
- Anyone who wants to be protected from hepatitis B
- Sexually active people who are not in long-term, mutually monogamous relationships
- Men who have sex with men
- Anyone seeking evaluation or treatment for a sexually transmitted disease
- Healthcare or public safety workers who might be exposed to blood or body fluids
- Residents and staff of facilities for developmentally disabled people
- People with diabetes who are younger than 60 years old. People older than 60 should discuss the vaccine with their healthcare provider
- Dialysis and pre-dialysis patients • People infected with HIV
- People in close personal contact (i.e., household or sexual) with someone who has chronic hepatitis B infection
- Current or recent injection-drug users
- Travelers to areas of the world where hepatitis B is common (Asia, Africa, the Amazon Basin in South America, the Pacific Islands, Eastern Europe, or the Middle East);
- People with chronic liver disease

Who should get vaccinated against Hepatitis A?

- All children at age 1 year
- Travelers to countries where Hepatitis A is common
- Family and caregivers of recent adoptees from countries where Hepatitis A is common
- Men who have sexual encounters with other men
- Users of recreational drugs, whether injected or not
- People with chronic or long-term liver disease, including Hepatitis B or Hepatitis C
- People with clotting-factor disorders
Grand Rounds...

Enterovirus D68 And Influenza Far More Dangerous Than Ebola In U.S., Say Top Infectious Diseases Physicians

Infectious diseases caregivers and public health professionals gathered in Philadelphia for the annual meeting of the Infectious Diseases Society of America (IDSA), more commonly known as IDWeek 2014. The Society organized the press conference because of the timely news about Ebola in the US, Europe, and West Africa, as well as children with respiratory disease caused by enterovirus D68.

A panel of infectious diseases experts expressed far more grave concerns for Americans about the risks of flu and enterovirus D68 than for the Ebola virus disease. Every year, millions of children in the United States catch enteroviruses that can cause coughing, sneezing, and fever. This year, the enterovirus that is most commonly causing respiratory illness in children across the country is enterovirus-D68 (EV-D68).

Infections with enteroviruses are usually common in the United States during summer and fall. This year, beginning in mid-August, states began seeing more children in hospitals with severe respiratory illness caused by EV-D68. CDC and states have increased testing, and have found that EV-D68 is making people sick in almost all states. Most of the cases have been among children. EV-D68 is not new, but it hasn’t been as common in the past. While this has been a big year for EV-D68 infections, CDC expects the number of cases to taper off by late fall. Take basic steps to keep your child from getting and spreading EV-D68.

# Is it Flu or Ebola?

<table>
<thead>
<tr>
<th>Flu (Influenza)</th>
<th>Ebola</th>
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<tbody>
<tr>
<td>The flu is a common contagious respiratory illness caused by flu viruses. The flu is different from a cold. Flu can cause mild to severe illness, and complications can lead to death.</td>
<td>Ebola is a rare and deadly disease caused by infection with an Ebola virus.</td>
</tr>
</tbody>
</table>

### How Flu Germs Are Spread

- The flu is spread mainly by droplets made when people who have flu cough, sneeze, or talk. Viruses can also spread on surfaces, but this is less common.
- People with flu can spread the virus before and during their illness.

### How Ebola Germs Are Spread

- Ebola can only be spread by direct contact with blood or body fluids from:
  - A person who is sick or who has died of Ebola.
  - Objects like needles that have been in contact with the blood or body fluids of a person sick with Ebola.
- Ebola cannot spread in the air or by water or food.

### Who Gets The Flu?

- Anyone can get the flu.
- Some people—like very young children, older adults, and people with some health conditions—are at high risk of serious complications.

### Who Gets Ebola?

- People most at risk of getting Ebola are:
  - Healthcare providers taking care of Ebola patients.
  - Friends and family who have had unprotected direct contact with blood or body fluids of a person sick with Ebola.

### Signs and Symptoms of Flu

- The signs and symptoms of flu usually develop within 2 days after exposure. Symptoms come on quickly and all at once.
- • Fever or feeling feverish
- • Headache
- • Muscle or body aches
- • Feeling very tired (fatigue)
- • Cough
- • Sore throat
- • Runny or stuffy nose

### Signs and Symptoms of Ebola

- The signs and symptoms of Ebola can appear 2 to 21 days after exposure. The average time is 8 to 10 days. Symptoms of Ebola develop over several days and become progressively more severe.
- • Fever
- • Severe headache
- • Muscle pain
- • Feeling very tired (fatigue)
- • Vomiting and diarrhea develop after 3–6 days
- • Weakness (can be severe)
- • Stomach pain
- • Unexplained bleeding or bruising

For more information about the flu and Ebola, visit www.cdc.gov/flu and www.cdc.gov/ebola.
Grand Rounds...

**Hepatitis Foundation International Launches Medical Advisory and Scientific Council (HFI-MASC)**

The Hepatitis Foundation International (HFI) has developed a Medical Advisory and Scientific Council (MASC) that serves to increase HFI’s body of medical literature and lend increased credibility to the integrity of HFI research, programs and resources. The MASC will advise the Foundation on specific medical and clinical aspects, as well as establish standards of care guidelines for the treatment of hepatitis, other related illnesses, liver disease and disorders.

HFI is seeking physicians, scientists, nurses, pharmacists, physician assistants, researchers, addiction professionals and other treatment and/or public health professionals nationally and internationally in the broad fields of testing, care, treatment, addiction, research and care, AIDS, hepatitis, diseases affecting the liver and other infectious diseases. For more information and to indicate your interest and/or nominate a candidate please email [MASC@Hepatitisfoundation.org](mailto:MASC@Hepatitisfoundation.org)

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**Announcing 2014-2015 National Viral Hepatitis Summit Series**

The Hepatitis Foundation International is conducting a series of one [1] day Summits, offering continuing education contact hours of professional training for health professionals and others working with people who are affected by or infected with viral hepatitis. Recent outbreaks and findings reported by the Centers for Disease Control and Prevention and the Institute of Medicine have highlighted the demand for a greater focus on providing information and training in order to improve the quality of care for patients and the implementation of best practices.

HFI’s Viral Hepatitis Summits are recognized for offering high value for its conference participants and exhibitors, and offers participants the opportunity to raise the visibility of their company and reach key healthcare professionals and others working with those affected by viral hepatitis. The Summits are well respected and the content is tailored to reflect the needs of your community. Summit evaluation data indicates attendees derive educational content that assists them in better care and treatment for their patients.

For more information about our Summits, contact the Hepatitis Foundation International at 1-800-891-0707 or email [summits@hepatitisfoundation.org](mailto:summits@hepatitisfoundation.org) for more details.

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**Pneumococcal vaccine reduces antibiotic-resistant infections in children by 62%**

“We’re at risk of living in a post-antibiotic world, where these miracle medications no longer work, but this vaccine is part of the solution to protecting ourselves from the growing threat of antibiotic resistance,” said lead researcher Sara Tomczyk, PHN, MSc, epidemic intelligence service (EIS) officer for the Respiratory Diseases Branch, Centers for Disease Control and Prevention (CDC), Atlanta. “Not only does this vaccine prevent pneumococcal infection, which means fewer antibiotics are prescribed, but it also prevents antibiotic-resistant infections.”

The pneumococcal vaccine recommended for young children not only prevents illness and death, but also has dramatically reduced severe antibiotic-resistant infections, suggests nationwide research being presented at IDWeek 2014™. Pneumococcal infection - which can cause everything from ear infections to pneumonia and meningitis - is the most common vaccine-preventable bacterial cause of death. Three-quarters of states require it for entry into daycare, and 85% of U.S. children have received the recommended four doses.
In the Pipeline......

Potential Use of OCA to Treat NASH

A clinical stage biopharmaceutical company, Intercept Pharmaceuticals, Inc., is focused on the development and commercialization of novel therapeutics to treat chronic liver diseases. Nonalcoholic Steatohepatitis (NASH) is a common and serious chronic liver disease caused by excessive fat accumulation in the liver, or steatosis, that induces inflammation and may lead to progressive fibrosis and cirrhosis. NASH is believed to be one of the most common chronic liver diseases worldwide, with an estimated 10% of the general adult population in the United States, with similar prevalence estimated in Europe, Japan and other developed countries, such as India and China.

More than 20% of NASH patients progress to cirrhosis within a decade of follow-up and, with the rapidly increasing prevalence of the disease, NASH has become the third most common reason for liver transplant in the United States and is projected to become the leading indication for transplant in the next few years, overtaking both chronic hepatitis C infection and alcoholic liver disease.

The Promise of a Hepatitis C Vaccine

An estimated 3.5 million Americans have chronic Hepatitis C (HCV), making it the most common long-term blood borne illness in the US. Around 75-85% of people with HCV will develop a chronic viral hepatitis infection. Of these, 60-70% will develop chronic liver disease, and 5-20% will develop liver cirrhosis over a 20-30 year time period. Between 1-5% of people with HCV will die from liver cirrhosis or liver cancer. Researchers indicate how a vaccine has shown promise against viral hepatitis C in a phase 1 clinical trial. The research team including Professor (Prof.) Ellie Barnes of the Nuffield Department of Medicine at Oxford University in the United Kingdom (UK) notes, 1 in 4 people clear the virus from their body naturally on first infection. This indicates the body is able to produce an immune response to ward off the virus.

In the UK study, published in Science Translational Medicine, researchers reveal how they have developed a two-tier vaccine approach that triggers and enhances an immune response to HCV to protect against infection. The vaccine tested the safety and effectiveness of the vaccine in 15 healthy volunteers. The volunteers were given a vaccine that "primes" an initial immune response to HCV. A second vaccine was administered 8 weeks later, which "boosts" this immune response and protects against infection.

The researchers explain that the vaccines were developed to trigger a strong response from T cells, which they say are the immune cells that ward off infection in people who are able to clear HCV from their body naturally. Results of the study revealed that the two vaccines activated a strong immune response in the volunteers, which the team says continued over the 6 month trial period. Researchers said the immune responses of volunteers were comparable to those found in individuals who clear HCV naturally.

The research team says another trial of the vaccine is already taking place in the US, in which trials are testing its efficacy among intravenous drug users. "We won’t really know if it works, if it is able to prevent hepatitis C infection, until we have the results of the efficacy studies in the US," notes Prof. Barnes.

FDA Approves New Hepatitis C Drug, Harvoni

The first complete treatment for hepatitis C that requires taking only a once-a-day pill won approval in October from the Food and Drug Administration. The drug, called Harvoni from Gilead Sciences, could shorten the duration of treatment and provide the first all-oral regimen for many patients. The new drug also appears to be a bit less expensive for some patients than Gilead’s existing blockbuster hepatitis C drug, To learn more about this new drug, click here.
**ADVOCACY:**

Project Inform and its community partners have initiated a campaign to involve the public in the discussion about the life-saving hepatitis C treatments that are significantly costly. The campaign highlights the lives of people living with hepatitis C and the fact that everyone living with the virus deserves access to the medications that can cure them of hepatitis C.

They will collect photographs people take of themselves, holding a sign that says, “I Deserve a Hep C Cure Because…” with the phrase completed. (For example, someone might complete the phrase with, “I Deserve a Hep C Cure Because… My friends and family need me” or “I Deserve a Hep C Cure Because… I take care of my aging mother”.) Images will be posted on social media outlets, such as Facebook, Tumblr, Twitter, and Instagram. and used in advocacy efforts to ensure all have access to the treatments that cure. To participate in the campaign, [click here](#) for the sign template and the release form to allow Project Inform to use your submission.

**T.I.P.S.**

**VaccineFinder.com**

HealthMap Vaccine Finder is a free, online service where users can search for locations that offer immunizations. HealthMap Vaccine Finder is maintained by HealthMap, a team of researchers, epidemiologists and software developers at Boston Children’s Hospital.

**THERE’S AN APP FOR THAT:**

*IDdx* is a decision-support software tool developed to assist in the diagnosis of infectious diseases. Users can find lists of matching infectious diseases by picking disease search criteria (103 signs & symptoms, 39 epidemiological factors, and 16 regions of the world). IDdx is regularly updated based on the latest editions of Control of Communicable Diseases Manual, Principles and Practice of Infectious Diseases and the Centers for Disease Control and Prevention Traveler. The user can see all the symptoms associated with a disease or see all the diseases associated with a symptom. *IDdx* is currently free on the App Store (iPhone or iPad) and Google Play (Android)—[Download Now](#).

**Hope Goes Viral**

December 2, 2014 – GIVING TUESDAY

#GivingTuesday™

Join HFI’s Giving Tuesday campaign: “Hope Goes Viral” – Giving Tuesday is the compassionate response to Black Friday and Cyber Monday. Across America, the public is challenged to share their “un-selfishness” by supporting causes close to their heart. [Click here to support HFI](#).