



# SAMHSA Activities and Priorities in Response to Viral Hepatitis

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# Viral Hepatitis in the U.S.

- **Hepatitis is a hidden epidemic with significant public health consequences.**
- An estimated 3.5-5.3 million persons are living with viral hepatitis in the United States, and millions more are at risk for infection.
- Because viral hepatitis can persist for decades without symptoms, 65%-75% of infected Americans remain unaware of their infection status and are not receiving care and treatment.
- Hepatitis is the leading cause of liver cancer. Without timely care, 1 in 4 persons with chronic hepatitis will develop liver cirrhosis or liver cancer.

# The Relationship of Behavioral Health and Hepatitis

- Injection drug use is a primary risk factor for exposure to blood borne pathogens such as the Hepatitis B virus (HBV) and Hepatitis C virus (HCV) because of needle-sharing and other drug use-related behaviors.
- Among new cases of HCV reported to the Centers for Disease Control and Prevention (CDC), injection drug use is the most common risk factor.
- Injection drug users (IDUs) have high rates of viral hepatitis infection with an estimated 64% chronically infected with HCV and up to 11% chronically infected with HBV.

# The Relationship of Behavioral Health and Hepatitis\*

- Between 14% and 36% of alcohol abusers are infected with HCV.
- 19.6% of the population with a serious mental illness is infected with HCV.
- Approximately 20% of those with behavioral health disorders are infected with hepatitis.

# National Viral Hepatitis Action Plan

## ● Goals:

### ● Prevention of new cases of viral hepatitis

- *Prevention counseling/screening/testing/referral to treatment*
- *Dissemination of evidence-based best practices through a SAMHSA-sponsored Treatment Improvement Protocol: TIP 53 Addressing Viral Hepatitis in People with Substance Use Disorders*
  - Improved knowledge of HBV and HCV risk, testing, care and treatment among providers of substance abuse treatment

### ● Prioritizes:

- *that persons who are already infected are tested and informed about their infection*
- *that those with infection are provided with counseling, care, and treatment*

# SAMHSA's Programs Focused on Hepatitis Prevention Education

- The Center for Substance Abuse Prevention (CSAP)/SAMHSA funded a number of grantees from 2008-2011 to provide hepatitis prevention training and education
  - *Prevention approaches: prevention education, screening and counseling for those at risk*
  - *Prevention education was also offered for SA, HIV, other STDs in addition to hepatitis*
  - *Over 2,600 individuals received hepatitis prevention training and education*

# SAMHSA Pilot Program to Evaluate Feasibility of Hepatitis Services in OTPs

- The Center for Substance Abuse Treatment (CSAT)/SAMHSA funded a pilot study completed in 2007 to assess approaches to addressing HCV infection in Opioid Treatment Programs (OTPs)
  - *Prevention approaches: screening and counseling those receiving services in OTPs and at risk*
  - *Vaccination for Hepatitis A and B offered*
  - *Treatment referrals for those with positive screens*

# Enhancing Substance Abuse Treatment Services to Address Hepatitis Infection among IDUs Program (2008-2013)

- Promoted HCV testing in OTPs serving minority populations
- Promoted HAV and HBV vaccination in the same populations, emphasizing an accelerated vaccine schedule for adherence
- Referred patients who tested positive for HBV or HCV to primary care or specialty hepatitis care
- Provided ongoing education and resources for OTPs and their patients

# 2013- Rapid Hepatitis C Virus Screening and Referral Program

- Purpose is to address the high prevalence of HCV infection among IV drug users in selected OTPs
- Focus: rapid HCV testing
- Grantees must develop a plan for providing referrals for care and treatment that include, but are not limited to primary health care, mental health, and medical services for those who are HCV positive or are at high-risk of HCV infection

# Activities

- Purchase of rapid HCV test kits and necessary supplies
- Implementation of quality assurance measures to appropriately conduct rapid HCV testing
- Staff training as it relates to implementing proper HCV rapid screening and testing techniques
- Grantees must also provide ongoing education and resources for OTPs. Resources include SAMHSA curriculum focused on viral hepatitis and liver wellness in OTP patients (i.e TIP 53 Addressing Viral Hepatitis in People With Substance Use Disorders).

# Activities\*

- Goal is to assist programs in developing sustainable programs for hepatitis screening and referral
- Grantees are also encouraged to facilitate the health insurance application and enrollment process for eligible uninsured clients

# Challenges/Opportunities Identified from Past Programs

- Programs were specific to Opioid Treatment Programs and not other providers/populations
- Confirmatory testing was not routinely undertaken
- Appropriate indicators to monitor effectiveness of programs needed
  - *E.g.: Referral and care linkages to be tracked*
- Training of providers
  - *Multiple modalities, increased dissemination efforts*

# Future Priorities in Support of the Viral Hepatitis Action Plan

- Health provider training for hepatitis: education on hepatitis, prevention, vaccination, screening, and treatment
  - *PCSS, webinars, online modules, social media, printed materials*
- Increase hepatitis screening, testing, and treatment in minority populations
- Dear Colleague Letter in support of USPSTF recommendation for HCV screening and encouraging mental health and substance abuse treatment programs to increase HCV screening

# Future Priorities in Support of the Viral Hepatitis Action Plan\*

- Increase linkages and referrals to treatment and care for behavioral health clients who screen positive for Hepatitis B or C
- Enhance monitoring and surveillance to evaluate hepatitis screening and vaccination programs in behavioral health settings
- Encourage pairing of prevention counseling/testing for HIV and hepatitis in behavioral health populations

# Future Priorities in Support of the Viral Hepatitis Action Plan\*\*

- Promote hepatitis vaccination (A and B) in all behavioral health settings
- Increase hepatitis (A and B) vaccination services in Opioid Treatment Programs
- Increase hepatitis primary prevention, screening, testing, and treatment referral in Opioid Treatment Programs

# Future Priorities in Support of the Viral Hepatitis Action Plan\*\*\*

SAMHSA MAI funds have a 5% set aside for hepatitis-related interventions

- Has been voluntary in past
- Will require that 5% of grant funds are used to provide hepatitis testing, counseling and referral to treatment going forward
  - *Includes primary prevention activities (e.g.: CSAP MSI programs) as well as a focus in substance abuse treatment (CSAT) and mental health treatment programs (CMHS)*

# Behavioral Health is Essential To Health



Prevention Works



Treatment is Effective



People Recover