

Miriam Hospital physician advocates awareness, collaboration to combat peaking hep C virus

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Lynn E. Taylor, M.D., director of The Miriam Hospital's HIV/Viral Hepatitis Coinfection program, states in the July, 2014 *Rhode Island Medical Journal* special edition, "RI Defeats Hep C" that eliminating hepatitis c virus infection (hep c or HCV) is feasible, can provide economic benefits, enhance capacity to address other health challenges, and improve health care disparities. Barriers to eliminating HCV in the United States, Taylor says, include lack of funding earmarked for HCV research, sparse federal funding for HCV prevention and care, underinsured and disenfranchised populations disproportionately affected by HCV, and low reimbursement for HCV care.

More than 185 million people worldwide, 3 percent of the world's population, are living with HCV and 350,000 die each year. On July 30, the White House Office of National AIDS Policy and Office of National Drug Control Policy will commemorate World Hepatitis Day, which is intended to raise awareness and understanding of viral hepatitis as a major global health threat.

"Eliminating HCV is likely going to be cost effective, but up-front resources will be needed," says Taylor, who created The Miriam's HIV/Viral Hepatitis Coinfection Program, and started Rhode Island's first free HCV testing program in 2005. "How will we build the infrastructure to get the new drugs to the people who need them? How will we utilize scientific breakthroughs to benefit those in need? Rational

decision making requires change at the governmental, health systems, pharmaceutical industry and payer levels, and the crisis over the costs of direct-acting antiviral agent (DAAs) to cure hep c requires social and political action."

A liver disease resulting from chronic infection with the hepatitis c virus, HCV is the most common blood-borne infection. It is estimated that five million Americans are infected with HCV, and because symptoms may not appear for many years, more than 70 percent are unaware they are infected. People with HCV remain symptom free for decades – during which time diagnosis will not occur without screening and the virus may unknowingly be transmitted to others – until they develop severe liver disease, including cirrhosis and liver cancer, and develop symptoms. This causes the silent epidemic we face today. In the U.S., HCV is the leading reason for liver transplantation.

"Baby Boomers," those born from 1945-1965, are particularly affected. One in 30 U.S. baby boomers has HCV, comprising 75 percent of the U.S. epidemic. Many who never suspected they were infected are now discovering their liver disease in advanced form. The enemy of HCV is time; scarring of the liver due to the hepatitis C virus develops over years. The U.S. HCV epidemic is peaking now because Baby Boomers unknowingly infected in the 1960s-1990s are now developing late-stage complications of HCV as decades have passed. The U.S. Centers for Disease Control and Prevention (CDC) now recommends an age-based screening strategy consisting of a one-time screening blood test for HCV for those at highest risk, including people who ever injected drugs (even once many years ago), and everyone born between 1945 and 1965 (Baby Boomers). Endorsed by the U.S. Preventive Services Task Force in June 2013, these broader CDC testing recommendations will likely detect a substantial number of people who don't know they are infected.

Sharing straws/bills when using cocaine (even once many years ago) and

having unprotected anal sex if you are an HIV-infected man who has sex with men, are also HCV risk factors, Taylor says. It is a curable infection, however, with many new medications soon to be available and expected to be safer, better tolerated and more effective than older, interferon-based treatments. Early diagnosis allows people who are infected to receive treatment sooner and prevent progression to more serious disease, such as cirrhosis and liver cancer.

Taylor was one of several Americans to help develop the World Health Organization's first hepatitis c guidelines for screening, prevention and treatment released this spring. The July 26 "RI Defeats Hep C" WaterFire, featuring the installation of 80 bonfires floating on Providence's three rivers, is part of the first free, evening artistic summer HCV festival to help bring awareness to the disease. Scott Holmberg, MD, MPH, Chief of Epidemiology and Surveillance for Viral Hepatitis at the CDC, will be the guest of honor.

Approximately 16,000 Rhode Islanders are afflicted with hepatitis c, and in keeping with CDC recommendations, Taylor says Rhode Island could and should become the first state to implement statewide HCV screening of baby boomers in primary care settings using electronic medical records.

"Hepatitis C burdens healthcare systems due to the high costs of treatment and end-stage liver disease and liver cancer," Taylor says. "Nevertheless, this epidemic has not been addressed in a comprehensive way in most locales."

Taylor is a viral hepatitis, HIV/AIDS and primary care physician focusing on prevention and treatment of HCV and HIV in vulnerable populations and on the primary care of people living with HIV. In 2013, Taylor was awarded a Rhode Island Innovation Fellowship entitled, "Rhode Island Defeats Hep C." [RI Defeats Hepatitis C](#) is a project

dedicated to the elimination of HCV in Rhode Island. Key priorities include:

- Facilitating strategic partnerships in Rhode Island with and among other organizations
- Advocating to reduce the stigma and health care disparities associated with HCV
- Developing efficient, affordable and equitable community-based responses
- Keeping Rhode Island up to date with rapidly evolving best practices for HCV testing and treatment
- Facilitating improvements in the capacity of Rhode Island's health systems to address HCV
- Utilizing innovations in health technology to enhance screening, diagnosis, care and cure, with the first goal being getting all Rhode Island electronic medical record systems to prompt Baby Boomer HCV screening
- Developing on-site HCV care for high prevalence populations
- Fostering HCV research that focuses on enhancing care in Rhode Island
- Using Rhode Island's world-class arts community to engage people in the HCV field

The Rhode Island Medical Women's Association honored Taylor as the 2014 Woman Physician of the Year for excellence and commitment to medicine, family and the community. She also received the 2014 Excellence in Medicine Award from the Rhode Island Department of Health's Division of Infectious Disease and Epidemiology, Office of HIV/AIDs & Viral Hepatitis, for her work to advance best practices to help identify and care for new hep c patients in Rhode Island.

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