

NATIONAL HEPATITIS B ACT

H.R. 3944



In an effort to develop a public health response to hepatitis B virus (HBV) infection, Representatives Charles Dent (R-PA) and Mike Honda (D-CA) have introduced the “National Hepatitis B Act.” The legislation would establish, promote, and support a comprehensive prevention, education, research, and medical management program for hepatitis B virus. This includes the development of a national plan developed by HHS to address hepatitis B.

NEED FOR EARLY DETECTION

The early diagnosis of HBV helps reduce transmission of the virus and improve health outcomes through treatment. Many individuals are not aware of their infection; most individual with chronic HBV will not have any signs or symptoms for as long as 20 or 30 years; Voluntary, confidential testing can be done through a simple blood test. Harm reduction measures and vaccination of family members reduces the transmission. For those chronically infected, counseling can be used to educate and reduce their risks of liver complications and transmitting the virus. The legislation authorizes a program to allow state, local and tribal governments to provide a voluntary HBV counseling and testing program targeted to high prevalence populations.

NEED FOR EXPANDED IMMUNIZATION PROGRAMS

The most effective way to prevent HBV infection is through immunization. The HBV vaccine has been available since 1982. Current guidelines recommend vaccination for children

HEPATITIS B VIRUS FACTS

- **1.4 million** Americans suffer from chronic HBV
- **46,000** new HBV infections were estimate in 2006
- **4,000** deaths result from HBV infection each year
- **\$658 million** in medical costs and lost wages occur each year as a result of HBV
- Up to **10 percent** of persons living with HIV are also infected with HBV

and high-risk adults. The legislation expands federal immunization programs to protect all children and adults at high-risk and from high-prevalence populations, and will reduce the burden of HBV.

NEED FOR SURVEILLANCE

Surveillance is essential to monitor acute and chronic HBV disease incidence, prevalence, and trends among populations and to evaluate the effectiveness of national, state and local HBV prevention efforts. Currently there is no federally funded hepatitis B surveillance system. The legislation supports the establishment and maintenance of a national chronic and hepatitis B surveillance program.

NEED FOR MEDICAL MANAGEMENT

All individuals with HBV should receive a medical evaluation to determine if treatment is appropriate and to monitor the liver for disease progression. Referral for drug and alcohol abuse treatment may be appropriate for some HBV-infected individuals as alcohol

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and drug consumption may accelerate liver disease. The legislation authorizes a program to allow state, local, and tribal governments to provide medical referral services, which currently don't exist.

NEED FOR INTEGRATION INTO EXISTING PUBLIC HEALTH PROGRAMS

The legislation calls for increased support for CDC funded hepatitis B coordinators to enhance activities to integrate HBV prevention and control activities into existing public health programs including HIV, hepatitis C, STD, TB, immunization, and maternal and child health programs.

NEED FOR RESEARCH

Research on HBV is essential to evaluate the most effective prevention programs, improve and increase available treatments, and develop better screening methods. This legislation requires the Centers for Disease Control and Prevention and the National Institutes of Health's National Cancer Institute to conduct and coordinate hepatitis related research. This includes specific areas of research such as research to develop, implement, and evaluate best practices for hepatitis B prevention especially in high-risk groups; and research on hepatitis B natural history, pathophysiology, improved treatments, and non-invasive tests that helps to predict the risk of progression to liver cirrhosis and liver cancer as well as tests to screen for liver cancer.

NEED TO ADDRESS UNDERSERVED AND DISPROPORTIONATELY AFFECTED POPULATIONS

Chronic HBV has a disproportionate impact on Asian Americans and Pacific Islanders; these groups account for over half of the chronic HBV infections. Immigrants coming to the United States from areas where HBV are endemic are at high risk for infection. Provisions of the legislation expand vaccination and increase

screening in these high-prevalence populations by giving priority to individuals with limited health care access.

ESTABLISHMENT OF EDUCATION AND AWARENESS PROGRAMS

This legislation calls for the implementation of education and awareness programs to provide an understanding of HBV. Activities that would fall under these programs include culturally sensitive health education, public awareness campaigns, and community outreach activities. These activities aim to enhance awareness of HBV and promote immunization programs.

SUPPORTING HR 3944 IS THE FAIR THING TO DO

There is no federal funding to provide core public health services for viral hepatitis. Addressing hepatitis by each outbreak is not disease prevention. In order to address this deadly disease, HR 3944 works to increase federal support, while capitalizing on existing public health programs and infrastructures that reach individuals at greatest risk of infection. This legislation seeks to increase society's awareness of HBV, particularly those most impacted by the disease, advance clinical research and medical options, while working to assist state and local authorities in prevention and control efforts.

REFERENCES

<http://www.cdc.gov/hepatitis/B/bFAQ.htm>

For more information, visit www.NASTAD.org