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**NASTAD Calls for Increased Leadership from the Federal Government
on Viral Hepatitis; Announces New Mission and Vision**

Washington, D.C. – The National Alliance of State and Territorial AIDS Directors (NASTAD) recognizes World Hepatitis Day on May 19, 2010 and calls on the federal government to provide much needed leadership and resources to address the staggering rates of hepatitis B and hepatitis C in the United States and abroad. “We are incredibly proud of the role NASTAD has played in strengthening the viral hepatitis advocacy movement in the United States, and will continue to call for increased leadership and funding from the Administration and Congress commensurate with the devastating impact of these infections,” remarked Julie Scofield, NASTAD’s Executive Director.

During NASTAD’s recent 2010 Annual Meeting, its membership unanimously supported a change to the organization’s mission and vision to more clearly articulate its work on viral hepatitis. This move follows more than ten years of work to raise the profile of the viral hepatitis epidemics among policymakers and provide capacity building and technical assistance to health department programs.

The mission now reads *“NASTAD strengthens state and territory-based leadership, expertise, and advocacy and brings them to bear in reducing the incidence of HIV and viral hepatitis infections and on providing care and support to all who live with HIV/AIDS and viral hepatitis.”* NASTAD’s vision is *“A world free of HIV/AIDS and viral hepatitis.”*

A recent Institute of Medicine (IOM) report [*“Hepatitis and Liver Cancer – A National Strategy for Prevention and Control of Hepatitis B and C”*](#) highlights a troubling lack of knowledge among health care and social service providers, at-risk populations, the general public and policy makers about the devastating impact of viral hepatitis. The report concludes that inadequate public funding for viral hepatitis prevention, control and surveillance programs is an apparent cause.

The Centers for Disease Control and Prevention (CDC) Division of Viral Hepatitis (DVH) receives only \$19.3 million annually to address viral

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hepatitis which impacts over five million Americans. State health departments receive an average of \$90,000 annually to support a viral hepatitis coordinator position. The funding provides little more than personnel costs, leaving no money for the actual provision of public health services. NASTAD calls on Congress to provide \$50 million in FY2011 to enable CDC to expand hepatitis prevention services including counseling, testing, and referral; to implement chronic hepatitis B and C surveillance systems; to educate the public and medical providers about viral hepatitis; and to assist states in vaccinating high risk adults for hepatitis A and B.

“Hepatitis B and C have never been given adequate attention by policy makers and the health system overall. This indifference has resulted in millions of dollars of unnecessary medical expenses and avoidable morbidity and mortality,” commented Scofield.

Viral hepatitis collectively refers to liver infections caused by five major viruses (A, B, C, D, and E). The most common types of viral hepatitis are hepatitis A (HAV), hepatitis B (HBV), and hepatitis C (HCV). At least one-quarter of persons living with HIV are co-infected with HCV, and up to 10 percent of persons infected with HIV are also infected with HBV. Globally, hepatitis B is the most common serious liver infection, responsible for 80 percent of all primary liver cases. Globally, an estimated two billion people have been infected with hepatitis B and each year three to four million people are infected with hepatitis C.

In the U.S., hepatitis C is the most common blood-borne, chronic viral disease. An estimated five million Americans have been infected with the hepatitis C virus (HCV). Approximately 3.2 million are chronically infected. As many as 1.4 million Americans are chronically infected with hepatitis B virus (HBV). CDC reported an estimated 43,000 Americans were newly infected with HBV and 17,000 Americans were newly infected with HCV in 2007 (the most recent year for which data are available). Racial and ethnic minorities, persons who inject drugs, gay men and HIV-positive individuals continue to bear the brunt of this epidemic. African Americans, Latinos, Asian Americans, Pacific Islanders, Native Americans, and Alaskan Natives have the highest rates of hepatitis A, B, and C infection in the U.S.

Founded in 1992, NASTAD is a nonprofit national association of state and territorial health department HIV/AIDS program directors who have programmatic responsibility for administering HIV/AIDS and viral hepatitis health care, prevention, education, and supportive services programs funded by state and federal governments. For more information, visit www.NASTAD.org.

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