

# Surveillance to identify care and monitor trends in Hepatitis C and HIV coinfection in California

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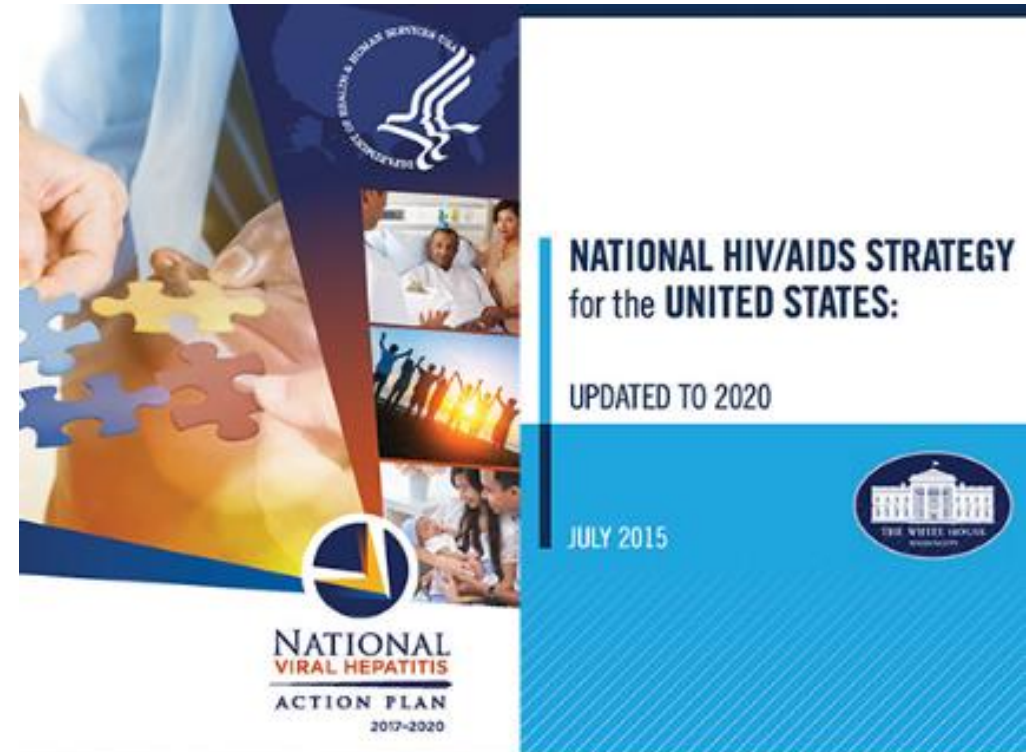
# Background: Hepatitis C Treatment for People Living with HIV

- 1 in 5 people in the United States who are living with HIV are coinfecting with hepatitis C (HCV).
- Guidelines recommend:
  - Screen for HCV in people living with HIV (PLWH) when they establish HIV care.
  - Consider HCV treatment.



# Background: Hepatitis and HIV integration

- Viral hepatitis treatment among PLWH is a priority in the national strategy, 2017-2020.
- The California Department of Public Health (CDPH) is moving to integrate hepatitis C and HIV in 2019.



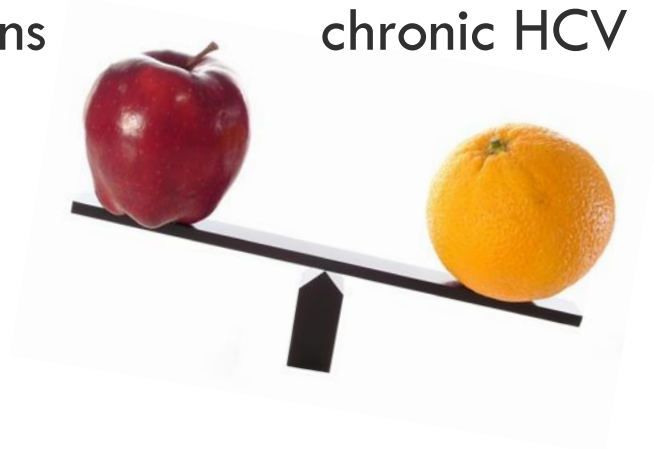
# Background: HIV and Hepatitis C in California

## HIV

- **5,061** new diagnoses in 2016
- 132,405 people living with HIV
- **Decline** in new diagnoses
- CA AIDS Drug Assistance Program (ADAP) covers HCV medications

## Hepatitis C

- **38,656** new chronic cases in 2016
- 424,000 estimated chronic HCV prevalence
- **Increase** in cases reported
- CA Medicaid covers treatment for all with chronic HCV



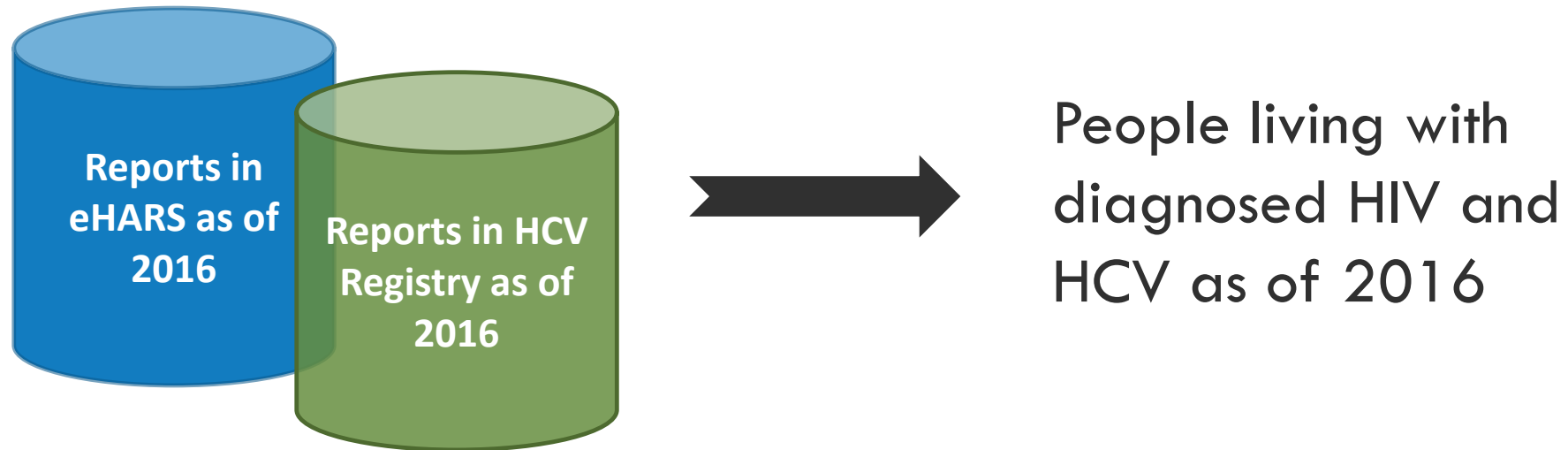


## Goal: Use Hepatitis C and HIV Laboratory Surveillance Data

- To monitor overlap of HIV and HCV epidemics
- To identify gaps in HCV care among PLWH

# Methods: HCV care among PLWH in HIV care

HIV registry (eHARS) was matched to the Hepatitis C registry



# Methods: HCV care among PLWH in HIV care

Laboratory surveillance data was used as a proxy for care

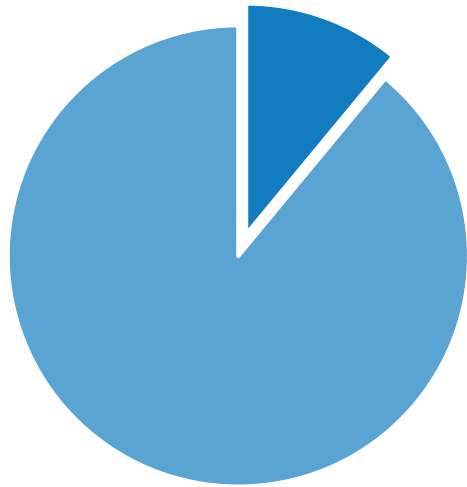
- HIV Care

- At least one CD4, viral load or HIV-1 genotype test in 2016

- HCV Care

- Detectable HCV virus (RNA) positive and
- At least one HCV genotype test or two or more detectable HCV RNA tests within six months.

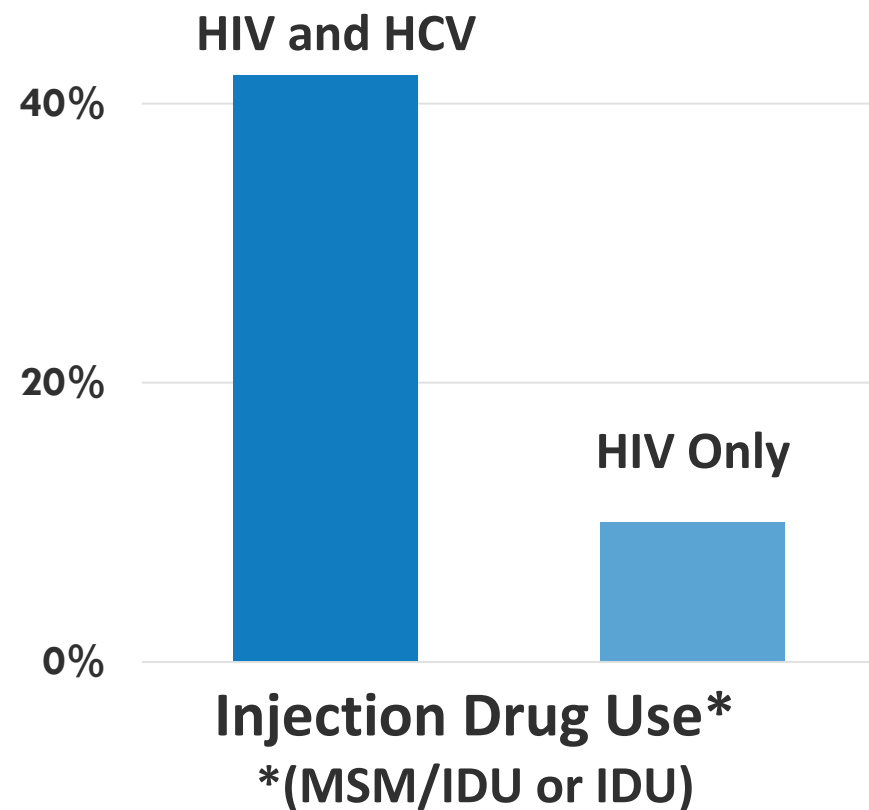
## Results: Percent with Coinfection



Of people in California with diagnosed HIV infection at the end of 2016, **11%** were known to be coinfected with HCV.



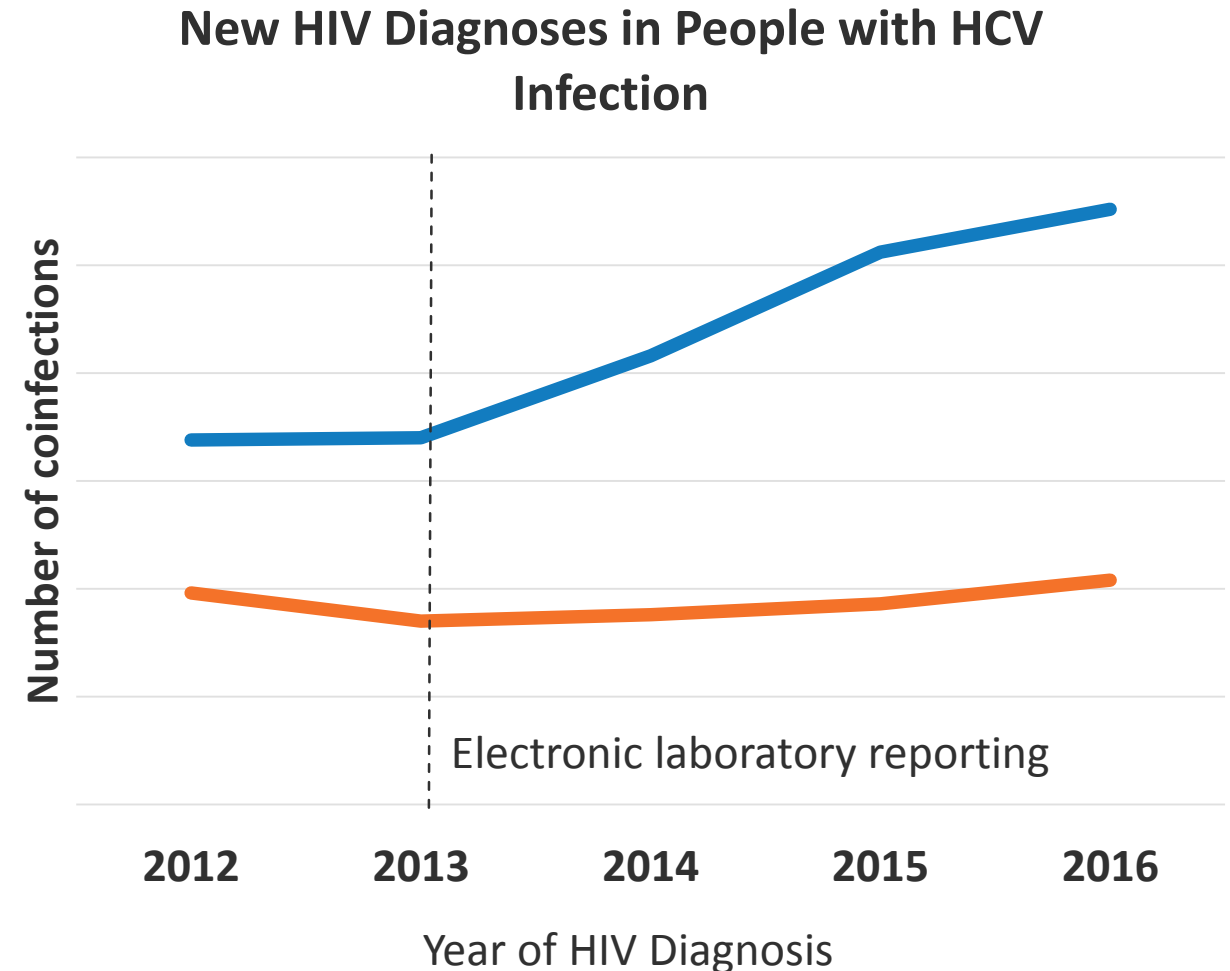
# Results: Percent with Injection Drug Use



Injection drug use was the most common risk factor among those with known HIV and HCV, reported by **42%** of persons with coinfection compared to **10%** of persons with HIV mono-infection at the end of 2016.

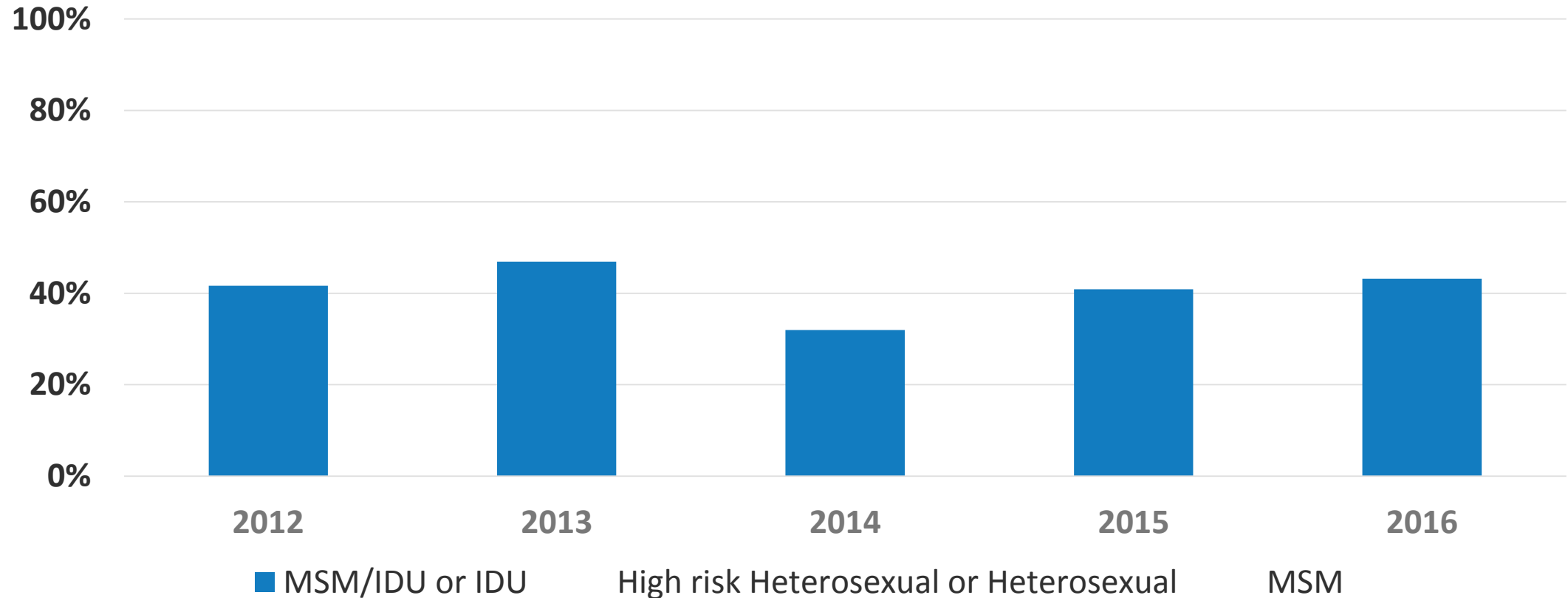
# Results: Trend in HIV and HCV Coinfection

- New HIV diagnoses among people with HCV have increased **63%** during 2012-2016.
- New HIV diagnoses 1 year or more after HCV have remained **stable**.



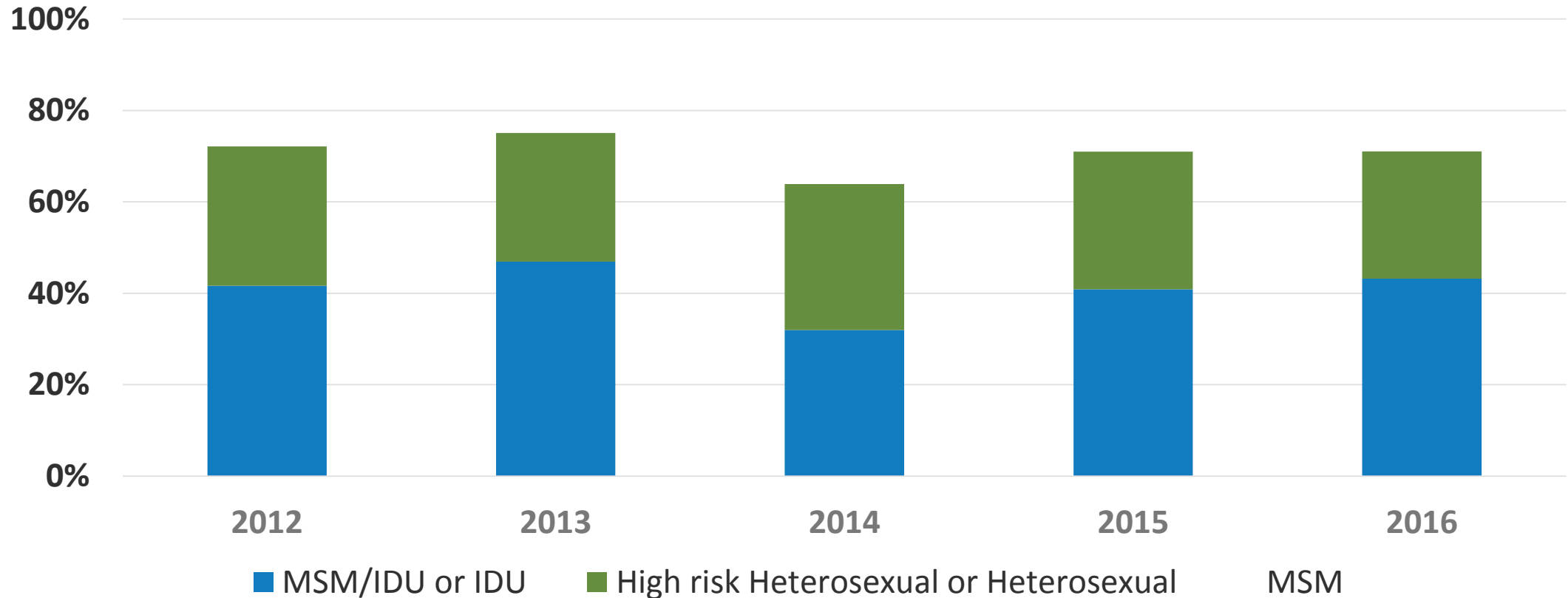
# Transmission Category of New HIV Diagnosed 1 Year + after HCV

Percent of HIV Diagnoses 1 year or more after HCV Report by HIV Transmission Category



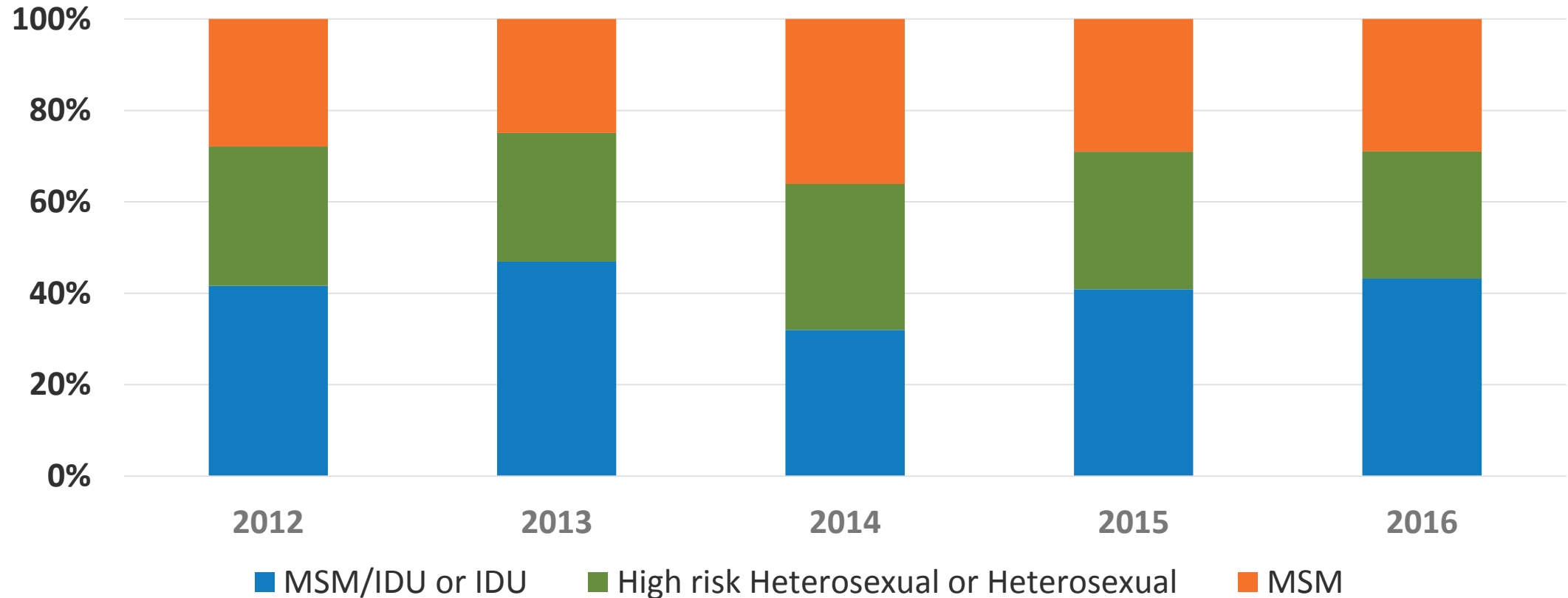
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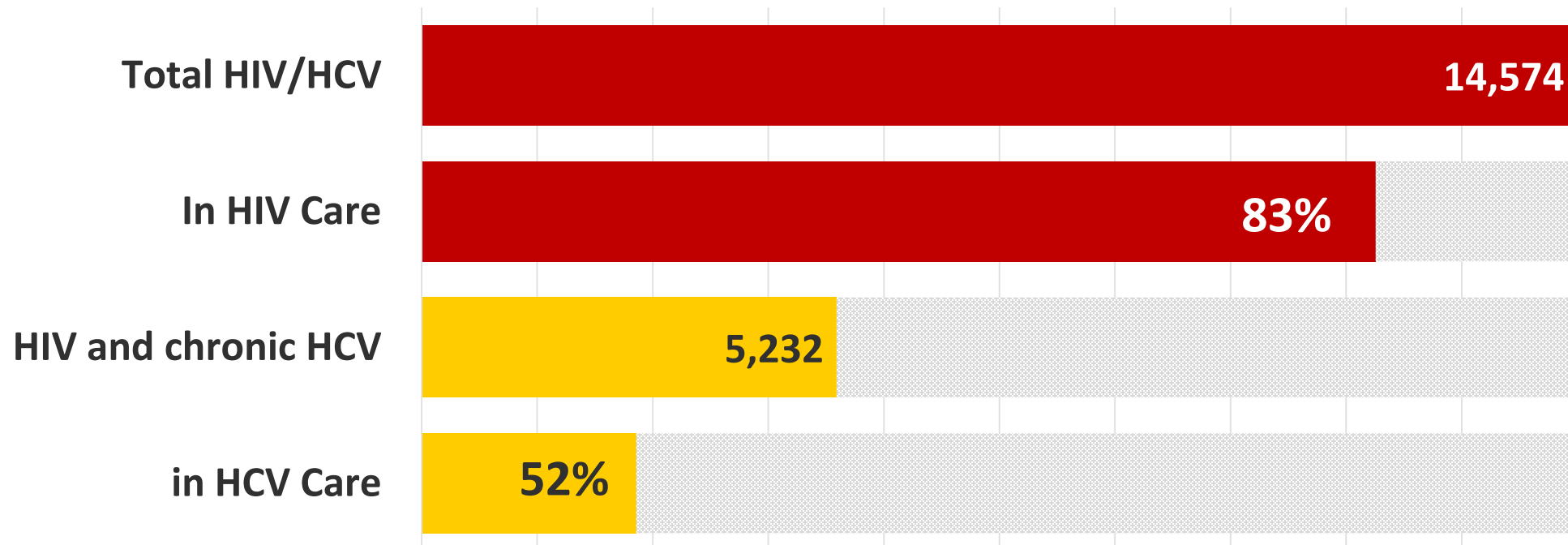
# Transmission Category of New HIV Diagnosed 1 Year + after HCV

Percent of HIV Diagnoses 1 year or more after HCV Report by HIV Transmission Category



# Results: Percent in Care, 2016

**83%** percent of those with coinfection were in HIV care, while **52%** of those with active HCV were in HCV care.



# Results: Characteristics Associated with HCV Care

	Not in HCV Care (n=2,526)	In HCV Care (n=2,706)	p-value
Median age as of 2016 (range)	54 years (6-86)	53 years (20-87)	<0.05
Male	49%	51%	NS
Non-white race	48%	52%	NS
<b>HIV Transmission Category</b>			
Injection drug use	47%	53%	NS
Male-to-male sexual contact	49%	51%	NS
Heterosexual	49%	51%	NS

\*Percents are row percents

# Results: Characteristics Associated with HCV Care

	Not in HCV Care (n=2,526)	In HCV Care (n=2,706)	Odds Ratio*	p-value
<b>HIV Care Measures</b>				
In HIV Care	46%	54%	2.1	<0.01
Retained in HIV care <sup>1</sup>	44%	56%	1.7	<0.01
Undetectable HIV viral load <sup>2</sup>	45%	55%	1.5	<0.01

\*Adjusted for age of person in 2016

<sup>1</sup> Two or more HIV viral load test or CD4 test or genotype test received in the year 2016 at least within 3 months or more apart.

<sup>2</sup> Most recent HIV viral load test result in 2016 of  $\leq$  200 copies/ml





# Conclusions

- An HIV/HCV registry match can help monitor trends in coinfection.
- Only about half of PLWH and HCV coinfection were in care for HCV.
- HIV care was positively associated with care for HCV.



## Next Steps

- CDPH is integrating HIV and viral hepatitis programs.
- Vulnerability assessment planned for the state using recent HCV, HIV and opioid data.
- More integrated HIV and HCV testing and linkages to care in settings that serve people who inject drugs.



# Acknowledgements at CDPH

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