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**Division of Disease Control**

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## **Health Advisory**

### **Update to CDC Hepatitis C Screening Recommendations (MMWR 2012;61[RR04]) September 7, 2012**

The Centers for Disease Control and Prevention (CDC) recently updated their *Recommendations for Prevention and Control of Hepatitis C Virus (HCV) Infection and HCV-Related Chronic Disease*. In addition to testing adults of all ages at-risk for HCV infection, CDC now recommends:

- **One-time testing without prior ascertainment of HCV risk for all persons born during 1945–1965.**
- Persons identified as having HCV infection should receive a brief screening for alcohol use and intervention as clinically indicated, followed by referral to appropriate care for HCV infection and related conditions.

These recommendations do not replace previous guidelines for HCV testing that are based on known risk factors and clinical indications. Rather, they define an additional target population for testing. Persons born during 1945–1965 are a population with a disproportionately high prevalence of HCV infection and related complications.

Morbidity and mortality related to HCV is increasing; earlier this year CDC published a study reporting HCV-related deaths have surpassed deaths related to HIV in the US. A majority of people living with hepatitis C are unaware of their infection and do not receive care and treatment for their disease. To increase the number of people who know their status, the CDC has developed evidence based recommendations that focus on Baby Boomers – a demographic that makes up 27% of the U.S. population but accounts for an estimated 75% of all chronic HCV infections. CDC estimates that implementation of these new recommendations will identify more than 800,000 additional people with hepatitis C.

For persons identified with HCV infection, CDC recommends they receive appropriate care. Providers can counsel patients on immediate steps to protect the liver from further harm including hepatitis A and B vaccinations, reducing or discontinuing alcohol consumption, and maintaining a healthy lifestyle. Patients should be linked to care with a provider who can evaluate and monitor the patient's HCV infection, advise on treatment options, and give further advice on maintaining liver health even if treatment is not recommended. Treatment decisions should be made by the patient and provider after several factors are considered, including stage of disease, hepatitis C genotype, co-morbidities, therapy-related adverse events, and benefits of treatment.

Clinicians should continue to test all patients for HCV if they report risk factors. Persons at risk include:

- Current or former injection drug users, including those who injected only once many years ago;
- Recipients of clotting factor concentrates made before 1987 or recipients of blood transfusions or solid organ transplants before July 1992;
- Chronic hemodialysis patients;
- Persons with known exposures to HCV, such as health care workers after needlesticks involving HCV-positive blood or recipients of blood or organs from a donor who tested HCV-positive;
- Persons with HIV infection; and
- Children born to HCV-positive mothers.

For the CDC's full HCV screening recommendations, go to <http://www.cdc.gov/hepatitis/HCV/GuidelinesC.htm>. Patient education resources can be found at <http://www.cdc.gov/knowmorehepatitis/>.

Providers interested in learning more about hepatitis screening, treatment, and management can contact PDPH's Viral Hepatitis Prevention Program at 215-685-6462.

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Philadelphia Department of Public Health

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# CHRONIC HEPATITIS C



## Why Baby Boomers Should Get Tested

### Why should baby boomers get tested for Hepatitis C?

More than 75% of adults with Hepatitis C are baby boomers. Baby boomers are people born from **1945 through 1965**. Most of them don't know they are infected.

- Baby boomers are five times more likely to be infected with Hepatitis C.
- Liver disease, liver cancer, and deaths from Hepatitis C are on the rise.
- As baby boomers age, there is a greater chance that they will develop serious, life-threatening liver disease from Hepatitis C.
- Testing people in this generation will help them learn if they are infected and get them into lifesaving care and treatment.
- Early diagnosis and treatment can help prevent liver damage, cirrhosis, and even liver cancer.

### Why do baby boomers have such high rates of Hepatitis C?

The reason that baby boomers have the highest rates of Hepatitis C is not completely understood. Most boomers are believed to have become infected in the 1970s and 1980s when rates of Hepatitis C were the highest. Since chronic Hepatitis C can go unnoticed for up to several decades, baby boomers could be living with an infection that occurred many years ago.

Hepatitis C is primarily spread through contact with blood from an infected person. Many baby boomers could have gotten infected from contaminated blood and blood products before widespread screening of the blood supply began in 1992 and universal precautions were adopted. Others may have become infected from injecting drugs, even if only once in the past. Still, many baby boomers do not know how or when they were infected.

### What should baby boomers know about Hepatitis C?

Hepatitis C is a liver disease that results from infection with the Hepatitis C virus. The disease can cause serious health problems including liver damage, cirrhosis, liver cancer and even death. In fact, Hepatitis C is a leading cause of liver cancer and the leading cause of liver transplants.

People with Hepatitis C:

- Often have no symptoms
- Can live with an infection for decades without feeling sick
- Can be successfully treated with medications

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CDC now recommends that anyone born from 1945 through 1965 get tested for Hepatitis C.

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### Is there a test for Hepatitis C?

Yes. There is a simple blood test to determine if a person has ever been infected with the Hepatitis C virus.

### For more information

Talk to your health professional, call your health department, or visit [www.cdc.gov/knowmorehepatitis](http://www.cdc.gov/knowmorehepatitis).



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