

Viral Hepatitis Surveillance and Prevention Unit, Michigan Department of Health and Human Services

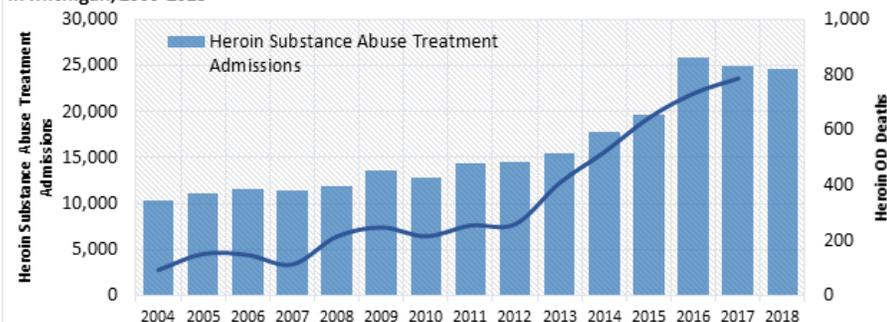
The 2018 Viral Hepatitis Surveillance Report is Here!

The 2018 Viral Hepatitis Surveillance Report is now available on our [website](#)! This year's report contains information on the epidemiology of hepatitis B (HBV) and hepatitis C (HCV) in Michigan, including demographic information such as infection rates and trends by age, sex, and race. It also includes testing and treatment data for hepatitis C as well as outcomes of chronic viral hepatitis infections. New changes to this year's report include reclassification of the "young adult" age group to adults under 40 years old (AU40). This change helped us to better capture the overarching injection drug use (IDU) issue within this cohort of HCV cases.

In 2018, there were 79 cases of acute HBV and 1,089 cases of chronic HBV. Cases of acute HBV increased from 2017, while chronic HBV cases decreased slightly. In addition, there were 179 cases of acute HCV and 10,545 chronic cases of HCV, both decreases from 2017 case counts.

The annual report also illustrates data relating to special populations, such as individuals co-infected with hepatitis and HIV, perinatal infections, and hepatitis C virus in young adults as it relates to drug use. With the ongoing opioid epidemic becoming an increasing concern, hepatitis C infections in the young adult population has become a major focus area. In 2018, there were 3,774 HCV cases among adults under 40 yrs old, with 82 percent reporting a history of injection drug use (where data was available). There has been a general increase in both heroin substance abuse treatment admissions and deaths in the past five years (see below), particularly from 2012 through 2018, a trend that mimics the number of hepatitis C cases amongst the AU40 population in this same time period.

Figure 10.1 Number Heroin Substance Abuse Treatments Admissions and Deaths in Michigan, 2000-2018



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New Pediatric HCV Treatment

The U.S. Food and Drug Administration (FDA) recently announced the approval of Mavyret (glecaprevir and pibrentasvir) tablets to treat all six genotypes of Hepatitis C Virus (HCV) in children ages 12 to 17 either without cirrhosis or with compensated cirrhosis.

Mavyret is part of a class of medications called “direct acting antivirals” (DAAs) that are designed to prevent the HCV virus from multiplying, and in most cases, DAAs cure HCV infection. The introduction of DAA therapy has resulted in high rates of disease cure along with a well-tolerated, short course of treatment (usually 8-12 weeks) that has raised the opportunities for widespread treatment and cure.

Treating adults and children for HCV supports the strategies and actions set forth in the National Viral Hepatitis Action Plan that calls for access to affordable hepatitis C treatment. Elimination of viral hepatitis – and its growing toll on lives and resources – is the ultimate goal!



2019



MICHIGAN HARM REDUCTION SUMMIT

The MDHHS Viral Hepatitis Unit hosted its first-ever Michigan Harm Reduction Summit at the Crowne Plaza Hotel in Lansing on April 2, 2019. Approximately 300 professionals from across Michigan gathered to learn strategies for curbing the opioid epidemic. There was diverse representation of summit attendees, including state and local health departments, public safety, health centers and medical professionals, universities, community-based organizations, community mental health, and more.

Topics include syringe access 101, best practices for syringe services program implementation, harm reduction strategies for reducing the transmission of infectious diseases related to injection drug use, overdose prevention, naloxone and stigma and cultural competency.



Attendees had the opportunity to network and tour two syringe service program mobile units from the Grand Rapids Red Project and Chippewa County Health Department's Safe X-Change Program. Plans for the 2020 Harm Reduction Summit are already underway.



For a list of summit handouts and presentations, please visit

www.Michigan.gov/HarmReductionSummit

To join the mailing list for the 2020 Harm Reduction Summit, please contact MDHHS-Hepatitis@michigan.gov.

Syringe Service Program (SSP) Updates

Michigan now has nine active syringe service programs (SSPs) with an additional eight planned to open before the end of 2019! SSPs focus on building relationships with people actively injecting drugs and increase accessibility to services such as substance abuse programs, of which SSP participants are five times more likely to enroll in than other injection drug users. Other services provided can include HIV and hepatitis C (HCV) testing and linkage to care, vaccinations, wound care, and overdose prevention training among others. Harm reduction programs can reduce HIV and HCV prevalence by around 50 percent and reduce accidental needle sticks within the community by as much as 66 percent.

Syringe service programs have been operating in Michigan since the mid-1990's, but prior to 2017 there were only five "legacy" programs in place (Detroit, Grand Rapids, Ann Arbor/Ypsilanti, Flint, and Traverse City). The MDHHS Viral Hepatitis Unit worked with the MDHHS HIV Prevention and Intervention Unit as well as the governor's Commission on Prescription Drug and Opioid Abuse to secure funds to support SSPs. This funding was distributed in 2017 to four local health departments that were identified as vulnerable areas for HIV outbreaks.

In 2018, MDHHS secured further funding to directly support four of the "legacy" programs and seven additional local health departments. The funding also helped to contract one of the "legacy" programs to provide technical support to other SSPs, host a state-wide harm reduction summit as well as seven regional meetings, a full-time harm reduction specialist at MDHHS, and a media campaign.

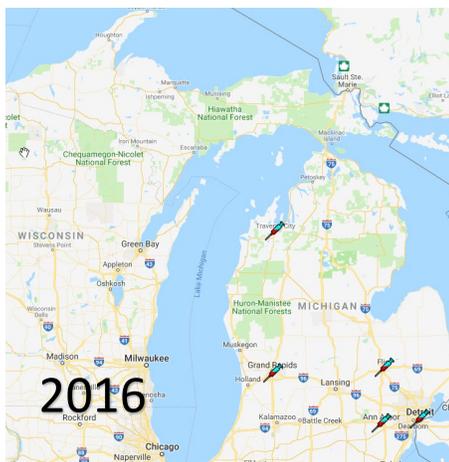
For fiscal year 2019-2020, MDHHS is preparing to provide support to more local health departments and community-based organizations in vulnerable areas of the state. Planning is also underway for the 2020 Harm Reduction Summit. For more information on syringe service programs in Michigan, visit: www.Michigan.gov/SSP.



MDHHS Viral Hepatitis Website Enhancements

We are excited to announce that the MDHHS Viral Hepatitis [website](http://www.Michigan.gov/SSP) is getting a revamp! Please look out for the updated website around mid-August. The website will include a brand-new landing page that is more mobile- and user-friendly and will feature three new pages: hepatitis C linkage to care, perinatal hepatitis, and the syringe services program (SSP) website. The website will also include information on upcoming training and events. Another addition is a "contact us" page with information on where the MDHHS Viral Hepatitis Unit can be reached. We are always open to feedback on how our website can be improved. If you have any comments or suggestions please contact us at MDHHS-Hepatitis@michigan.gov.

The good news is the Syringe Service Programs website is already up and running! This site contains valuable resources such as information and research on the benefits of SSPs, materials for SSP implementation, and educational materials. It also contains a map where users can see the currently running SSPs within Michigan. Not sure where the closest SSP to you is? Head to www.Michigan.gov/SSP to find out!



2019 Regional Harm Reduction Trainings

The MDHHS Viral Hepatitis Unit hosted regional harm reduction meetings across Michigan to share and discuss results from Michigan's Vulnerability Index Assessment project to identify areas where prevention efforts are warranted. MDHHS' Viral Hepatitis Epidemiologist and Surveillance Coordinator, Adam Hart, and MDHHS' Harm Reduction Analyst, Brandon Hool, led the meeting and presented on results from Michigan's Vulnerability Index Assessment and harm reduction initiatives in Michigan.

In addition, special guest speaker, Rob Lyerla, PhD, MGIS, professor from Western Michigan University, shared a community-based needs assessment tool, known as the Calculator for An Adequate System Tool (CAST) that communities can use to strategically allocate resources to best serve their populations. CAST generates community-specific recommendations of need for identified components in a community substance abuse care system.



At the meeting, attendees had the opportunity to network and participate in engaging discussions surrounding hepatitis C testing, treatment, substance use disorder treatment, and harm reduction services. Each regional harm reduction meeting also featured a special guest speaker(s) from local community-based organizations to highlight their delivery of services, such as syringe access, testing, and linkage to care, to people who inject drugs.

Attendees included a diverse group of staff from recovery centers, social service organizations, local health departments, community-based organizations, health centers/hospitals, universities, prepaid inpatient health plans, and housing services.

The last Regional Harm Reduction Meeting will be held in **Marquette** on August 21. If you are interested in attending, please contact MDHHS-Hepatitis@michigan.gov.

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Save the Date

8/21 Regional Harm Reduction
Meeting - Marquette

Helpful Links



www.Michigan.gov/Hepatitis

www.MI.gov/HepatitisAOutbreak

www.Michigan.gov/InjectionSafety

www.Michigan.gov/HepatitisB

www.Michigan.gov/CDInfo

www.Michigan.gov/HAI

[CDC Hepatitis](#)

[CSTE HCV Subcommittee](#)

[Know More Hepatitis Campaign](#)

[Know Hepatitis B Campaign](#)

[CDC Hepatitis Risk Assessment](#)

[Hepatitis A](#)

[Hepatitis B](#)

[Hepatitis C](#)

[USPSTF](#)

[AASLD](#)

[Institute of Medicine Report](#)

[One and Only Campaign](#)

[Injection Safety Resources](#)

[Hepatitis Occupational Exposure](#)

[Guideline](#)

[Blood Glucose Monitoring](#)

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