



Sacramento Native American Indian Health Center's Hepatitis C Treatment Program

For more than three years, the [Sacramento Native American Health Center \(SNAHC\)](#) has been operating a Hepatitis C Treatment and Support Program as part of their primary care clinic to address the high incidence of viral hepatitis seen among American Indians and Alaska Natives (AI/ANs). According to the Centers for Disease Control and Prevention (CDC), AI/ANs are nearly three times more likely than Whites to develop acute cases of the hepatitis C virus.^{1,2} While most people infected with hepatitis C may not show symptoms or feel sick, they are at risk for chronic liver disease and can transmit the disease to others through high risk behaviors.³ These behaviors include intravenous drug use, smoking methamphetamines or crack, and improper tattoo procedures. A recent CDC guideline recommended that all adults born during 1945-1965 be tested for hepatitis C, overriding the traditional belief that only those who exhibit risk behaviors for the virus should be tested.⁴

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Dr. Geoffrey Booth, Medical Director and the supervisor of the hepatitis C Program at the Sacramento Native American Health Center.



Well ahead of the CDC's recommendation, SNAHC has been routinely screening all adults for hepatitis C who use the clinic's primary care services. Those who test positive for the virus are referred to Dr. Geoffrey Booth, the Medical Director at SNAHC, for counseling on how hepatitis C is contracted, the options and risks for treatment, and how to prevent the spread of the virus. SNAHC also offers a weekly Hepatitis C Support Group facilitated by one of SNAHC's Registered Nurses. The Support Group is an opportunity for those who are considering treatment, those in treatment, and those who have completed treatment to learn and share information about hepatitis C in an informal setting. The clinic also conducts health education through its Home Visitation Program and encourages patients to contact the clinic at any time for more information about the virus. The clinic refers patients to free nurse-led hepatitis C education classes sponsored by pharmaceutical companies that help patients better understand what to expect during treatment.

The need for comprehensive hepatitis C screening at the primary care level was identified by SNAHC long before the CDC's recommendation, putting SNAHC well ahead of the curve. The program was started by the previous Medical Director, who came to the clinic with a passion for treating hepatitis C. She spoke with local hepatologists about addressing hepatitis in a primary care setting. She and a physician's assistant then put together

policies and procedures for establishing a treatment program, as well as the support group.

Dr. Booth believes SNAHC's Hepatitis C Treatment Program is effective because it is so well-coordinated and takes into account the individual needs of patients. The program provides a support group, facilitates treatment for patients with limited funds or who lack insurance, and offers culturally appropriate care for AI/ANs. For example, SNAHC will arrange for discounted laboratory testing and connect patients with pharmaceutical companies who provide free medication for hepatitis C treatment for those whose income falls below a certain level. According to Dr. Booth, the most successful component of their program is their weekly observation and consistent follow-up with their hepatitis C patients. SNAHC's hepatitis C patients receiving treatment come into the clinic every week to get their interferon shots. During these weekly visits, the patient and the physician discuss barriers to treatment, medication side effects, and how the clinic can support the patient to complete their treatment. This consistent follow-up ensures treatment completion and that patients receive the help they need.

Dr. Booth believes hepatitis C is an important health issue for providers caring for AI/AN patients. For those who are interested in starting their own hepatitis C treatment program, Dr. Booth urges, "With proper planning and procedures, primary care clinics are absolutely capable of treating hepatitis C." Dr. Booth stresses the importance of consulting with specialists who treat hepatitis C before clinics start a treatment program in a primary care setting. Dr. Booth recommends talking with health care providers who can be a resource such as hepatologists and gastroenterologists as well as staff at other medical clinics that have successful hepatitis C treatment programs. For more information on hepatitis C health professionals please see the CDC's website at:

<http://www.cdc.gov/hepatitis/index.htm>.

References

1. Centers for Disease Control and Prevention (CDC). (2012). Summary of notifiable diseases--United States, 2010. *Morbidity and Mortality Weekly Report (MMWR)*. 2012; 59(53):1-111. http://www.cdc.gov/mmwr/mmwr_su/mmwr_nd/. Accessed August 3, 2012.
2. Office of Minority Health. (2012, June 28, 2012). Hepatitis and American Indians/Alaska Natives. Retrieved from: <http://minorityhealth.hhs.gov/templates/content.aspx?lvl=3&lvlid=541&ID=6494>.
3. Centers for Disease Control and Prevention (CDC). (2011). Hepatitis C Information for Health Professionals. Retrieved from: <http://www.cdc.gov/hepatitis/HCV/index.htm>.
4. Centers for Disease Control and Prevention. (2012). Recommendations for the Identification of Chronic Hepatitis C Virus Infection Among Persons Born During 1945-1965. *Morbidity and Mortality Weekly Report (MMWR)*. 2012;61(RR04):1-18. http://www.cdc.gov/mmwr/preview/mmwrhtml/rr6104a1.htm?s_cid=rr6104a1_e. Accessed August 20, 2012.