



Hepatitis C

HCCAP

Tina M. St. John, MD
Medical Director, Caring Ambassadors Program
13023 NE Hwy. 99, 7-24
Vancouver, WA 98686

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Myron J. Levin, M.D., ACIP Chairman
Centers for Disease Control and Prevention
National Immunization Program
Division of Epidemiology and Surveillance, Mail Stop E61
1600 Clifton Road, NE
Atlanta, Georgia 30333

RE: Hepatitis B Virus Infection Comprehensive Immunization Strategy to Eliminate Transmission in the United States, 2005 Update

Dear Dr. Levin,

We have reviewed the draft recommendations of ACIP, "Hepatitis B Virus Infection Comprehensive Immunization Strategy to Eliminate Transmission in the United States, 2005 Update." Our organization supports the overall intention and means proposed in these recommendations. However, we believe certain items require additional consideration before these recommendations are finalized.

Generally, our concerns fall into two main topic areas. With respect to screening recommendations, we believe that these represent opportunities to screen not only for the hepatitis B virus (HBV) but also for the hepatitis C virus (HCV) and the human immunodeficiency virus (HIV). Good public health practice calls for maximizing opportunities to intervene in related disease processes. Given the shared routes of transmission of HBV, HCV, and HIV, we believe it is both prudent and efficacious to screen for these viruses simultaneously in those persons whose viral status is unknown.

Second, we believe it is essential for those persons who are HBsAg-positive to be screened for both HCV and HIV. Again, due to shared routes of transmission, these viruses are often present together. Further, coinfection affects clinical management. Therefore, we believe the management portion of the document should specifically recommend HCV and HIV screening in all HBsAg-positive individuals whose status with respect to these viruses is unknown.

These issues are of paramount importance in the context of prevention and control of chronic, blood-borne viral diseases. While only HBV is currently vaccine preventable, we believe it is in the best interest of at-risk clients and the population at large to maximize public health opportunities to intervene in these closely related diseases.

We urge ACIP to take the time necessary to allow for a rigorous discourse about these issues before finalizing your recommendations.

Respectfully Submitted,

Tina M. St. John, MD, Medical Director
Lorren Sandt, Managing Ambassador