



BC Centre for Disease Control
BC Hepatitis Services

BC Hepatology Nurse Leader's Group Newsletter

Issue #20
Dec 2011

CONTENT

On-Line Viral Hepatitis Course

British Columbian's Attitudes towards Safer Drug Use Practices

Promising New Treatment for Hepatitis C, Continued Treatment Access Issues for those living with the virus

iPhone App for Hepatitis Treatment

Hepatitis C Class Action Settlement Agreement

Education and Conferences

Publications and Resources

Letter to Santa



I can't believe another year is almost over, the holiday season is here and we have already had our first snowfall.

2011 was a busy year at BCCDC with consolidation and accreditation. We are happy to report that we survived both and are looking forward to planning our 2012 activities.

It is hard to imagine that the on-line Viral Hepatitis Course has been running for a year now. Three cohorts of students from across Canada completed this course in 2011. Well done! Registration is now open for the next course which starts Jan 2012.

During September and October two workshops were held in Vancouver. The 2011 Interdisciplinary Viral Hepatitis Workshop was held on Sept 22nd and 23rd and the Hepatology Nurse Leaders' Workshop was held on October 21st; both were a great success. I am recruiting people to join the 2012 Nurse Leaders Educational Planning Committee. If you are interested in becoming involved please contact me sandi.mitchell@bccdc.ca

Wishing everyone a very happy festive season and all the best for 2012!

Sandi Mitchell
Nurse Educator
sandi.mitchell@bccdc.ca
604 707-2435

On-Line Viral Hepatitis Course

In January 2011, BC Centre for Disease Control (BCCDC), and the BC Institute for Technology (BCIT) launched an 8 week on-line Viral Hepatitis Course. The course, titled Viral Hepatitis (NSOH 7700), was developed by the BCCDC, and is being offered through BCIT to create a new and unique on-line learning opportunity.

This is the only course of its kind in Canada for health and social care professionals who work with at-risk individuals/populations and/or those living with viral hepatitis.

The course is endorsed by the Canadian Association of Hepatology Nurses (CAHN) and they sponsored twenty nurses for half of the cost of the course tuition throughout 2011. Information around the 2012 Bursary will soon be announced. For further information: <http://www.livernurses.org>

Registration for the course starting Jan 2012 is now open. You can register on-line at: <http://www.bcit.ca/health/industry/viralhep.shtml>

Viral Hepatitis Education Workshops

This year we had a unique opportunity to collaborative with Merck Canada to develop a two day Nurse Leader's Educational Program with a dinner and keynote speaker on October 21st and 22nd. This program was well attended and a great success.

The 2011 Interdisciplinary Viral Hepatitis Workshop was held September 22nd – 23rd at the Holiday Inn. The following table provides a summary of the evaluations of both workshops:

Interdisciplinary Viral Hepatitis Education Workshop Evaluation Summary 2011					
	Ideal	Very Good	Satisfactory	Inadequate	
Clarity of content	43%	46%	11%		
Overall quality	40%	47%	13%		
Useful to my work	Yes 88%	No 7%	Don't know 5%		
Hepatology Nurse Leaders' Workshop Evaluation Summary 2011					
	Excellent	Very Good	Good	Fair	Poor
Clarity of content	48%	28%	16%	6%	2%
Useful to my work	47%	29%	18%	6%	
Overall quality	55%	36%	9%		



British Columbian's Attitudes towards Safer Drug Use Practices

The media and vocal opponents often negatively represent safer-drug use initiatives based on ideology, not evidence; therefore, to better understand the public's attitude toward harm reduction (HR), the Harm Reduction Strategies and Services (HRSS) Committee at the BCCDC conducted a telephone survey to ask British Columbian's about their attitudes towards various harm reduction strategies and services.

The survey was conducted in August of 2011 by random digit dialing. Socio-demographic information collected included: sex, age, education level, and residing geographic location. Respondents answered questions about their attitudes towards: broad public health issues, general harm reduction strategies and services, needle distribution, and safer inhalation equipment distribution (including glass stems and mouthpieces).

Two-thousand completed surveys from across BC were collected. Our sample is 50% female, and was divided into 3 age groups: 19-34 years (28%); 35-54 years (37%); and 55+ years (35%). Seven percent have less than high school education, while 30% have completed a university degree. There were an equal number of respondents from each of the 5 health authorities (20% from each HA).

The majority of our sample (96%) stated that drug and alcohol addiction is an important public health issue. Overall we found high support for HR strategies in BC: General HR (79%); needle distribution (76%); needle distribution in local community (69%); safer inhalation equipment distribution (55%). In the multivariable analysis, those less likely to support HR were males compared to females, older age groups (35-54 years and 55+ years) compared to those 19-34 years, and Fraser Health Authority compared to Vancouver Coastal Health Authority.

In contrast to some media reports, our results show high support for HR in BC. However, pockets of the population are less likely to support HR than others. Tailoring messages towards these groups is important to reduce stigma and gain support for HR strategies that protect the health of people who use illicit drugs.

Further analysis and results dissemination are being conducted. For more information contact Despina Tzemis at: despina.tzemis@bccdc.ca





Promising New Treatment for Hepatitis C, Continued Treatment Access Issues for those living with the virus

The protease inhibitor boceprevir (Merck's Victrelis) has been approved for use with chronic hepatitis C infection (genotype 1 only) patients by Health Canada and is now under review by PharmaCare in British Columbia, with a decision expected in April 2012.

The patient community welcomes this long-awaited and much-anticipated news that will benefit both non-responders of earlier treatment tries and those who have never been on treatment for chronic hepatitis C infection (genotype 1). The potential for improved quality of life, length of life and productivity along with reduced burden to the health care system overall provides hope to patients and very real benefits to their families and communities.

This new treatment makes the outmoded qualifying criteria for treatment used by PharmaCare in BC even more dismaying for people living with the virus and their families, friends and communities.

The current standard of care (ribavirin with pegylated interferon) requires elevated ALT levels twice 3 months apart. ALT levels do not always rise with liver disease and in fact, in more advanced stages of liver disease, won't be elevated because the liver can not respond properly to injury.

As boceprevir is used with ribavirin with pegylated interferon, many patients who should be treated can still be denied.

The recommended criteria for boceprevir is fibrosis 2 or greater. The requirement for a liver biopsy as a means of determining fibrosis strikes our members as barbaric, given the evidence that treating early (before liver disease) increases treatment success.

Early treatment of chronic hepatitis C provides the best outcome for the patient, for the health care system and for the community

Note that untreated chronic hepatitis C can lead to liver disease, end-stage liver disease, liver cancer and liver transplantation all of which create far greater burden on individuals, families, communities and the health care system overall.

For an alternative, the following reflect a more fiscally responsible and humane approach to treating hepatitis C in British Columbia, namely that:



- the single qualifier for treatment of chronic hepatitis C be a confirmed chronic hepatitis C diagnosis
- treatment be a decision between physician (GP and/or specialist) and patient
- the discussion and timing of chronic hepatitis C treatment be part of the ongoing care and management of chronic hepatitis C and be available by prescription
- treatment be done as early as possible for the best possible outcome

Submitted by the Pacific Hepatitis C Network

iPhone App for Hepatitis Treatment

The University of Liverpool has launched an iPhone app, HEP i-chart that provides Hepatitis C (HCV) patients with quick and easy access to the latest information about drug interactions.

HEP i-chart is based on the website (<http://www.hep-druginteractions.org/>) which provides a comprehensive online guide to the interactions between anti-hepatitis drugs and other drugs. It is a tool that provides Hepatitis C patients and healthcare professionals with immediate access to up-to-date information on potential drug interactions between HCV drugs, and other drugs that the patient may be prescribed as well as over-the-counter, recreational or herbal medications.

Professor of Pharmacology, David Back, said: "We are delighted to launch with our partners – KnowledgePoint360, MSD and Janssen this new iPhone application that provides Hepatitis C patients and healthcare professionals with instant and easy access to information about HCV drug interactions which is relevant and reliable and up-to-date."

Hepatitis C Class Action Settlement Agreement

The Joint Committee of the 1986-1990 Hepatitis C Settlement Agreement would like to meet with people who are class members in this settlement to discuss what is working well and what could be improved now that the settlement is undergoing a review for financial sufficiency which takes place every three years.

If you are willing to be part of such a meeting, please contact Sharon Matthews by email at smatthews@cfmlawyers.ca. She can also be contacted by telephone at 1-800-689-2322.

2012 Education and Conferences

The 5th Wave

By Rich Tennant

ONCE AGAIN RONALD FELT PEOPLE WERE AVOIDING HIM JUST BECAUSE HE HAD HEPATITIS C.

© RICHTENNANT



- On-Line Viral Hepatitis Course

When: Jan, 2012

<http://www.bcit.ca/health/industry/viralhep.shtml>

- Canadian Association of Hepatology Nurses Educational Day

When: Feb 23, 2012

Where: Montreal, QC

<http://livernurses.org/cahns-educational-day>

- 8th Australasian Viral Hepatitis Conference

When: Sept 10- 12, 2012

Where: Auckland, New Zealand

<http://www.hepatitis.org.au>

- AASLD – The Liver Meeting 2012

When: Nov 9 – 11 2012

Where: Boston, Massachusetts

<http://www.aasld.org/conferences/meetings/Pages/default.aspx>

Publications and Resources

- Hepatitis Monthly

<http://hepatmon.com>

- AASLD: Deaths Due to Hepatitis C Now Exceed HIV Deaths

<http://www.hivandhepatitis.com/hiv-epidemiology/334,468,576-hiv-aids-mortality-hiv-aids-mortality/3347-aasld-deaths-due-to-hepatitis-c-now-exceed-hiv-deaths>

- Barriers to receiving hepatitis C treatment for people who inject drugs: Myths and evidence

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3212767>

- Social determinants of health associated with hepatitis C co-infection among people living with HIV: results from the Positive Spaces, Healthy Places study

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3205830>

- Incidence of Hepatitis-C among HIV infected men who have sex with men (MSM) attending a sexual health service: a cohort study

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3040713/>

Help us to Help you!

If you have ideas for the newsletter or have activities or research that you would like to share with the group please get in touch with Sandi at sandi.mitchell@bccdc.ca



- Predicting spontaneous clearance of acute hepatitis C virus in a large cohort of HIV-1-infected men
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3095479>
- Outreach Planning Guide - For Infectious Disease Practitioners who work with Vulnerable Populations
http://www.nccid.ca/files/Outreach_Guide/Outreach_Planning_Guide_final.pdf
- Global epidemiology of hepatitis B and hepatitis C in people who inject drugs: results of systematic reviews
[http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(11\)61097-0/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(11)61097-0/fulltext)
- Hepatitis C Transmission in Injection Drug Users: Could Swabs Be the Main Culprit? (Abstract)
<http://www.ncbi.nlm.nih.gov/pubmed?term=Hepatitis%20C%20Transmission%20in%20Injection%20Drug%20Users%3A%20Could%20Swabs%20Be%20the%20Main%20Culprit%3F>
- Inactivation and Survival of Hepatitis C Virus on Inanimate Surfaces.
<http://www.ncbi.nlm.nih.gov/pubmed?term=Inactivation%20and%20Survival%20of%20Hepatitis%20C%20Virus%20on%20Inanimate%20Surfaces>
- Patient-Care Practices Associated With an Increased Prevalence Of Hepatitis C Virus Infection among Chronic Hemodialysis Patients
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3147181>
- Hepatitis B and C among women with illegal social behavior in Isfahan, Iran: Seroprevalence and associated factors
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3212782/?tool=pubmed>
- Incidence of Hepatitis-C among HIV infected men who have sex with men (MSM) attending a sexual health service: a cohort study
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3040713>
- The Hepatitis Comics: Levity for the Liver
<http://hepatitiscomics.blogspot.com>





Letter to Santa

Dear Santa,

Here is what I want for Christmas:

A pain-free non-invasive replacement for liver biopsies that is 100% accurate that also performs liposuction at the same time.

A 100% effective and cheap treatment for hepatitis C that has only one side effect—making people smarter.

A cheap C vaccine.

A Ministry of Health that agrees that funding hepatitis C is a great idea.

A shiny new liver that is installable without surgery and comes with a lifetime guarantee.

An iPhone (I figure I will need something fun to play with after I am healthy.)

Merry Christmas from someone who isn't always good, but tries to be.

(Adapted from: http://hepatitiscomics.blogspot.com/2010_12_01_archive.html)



Please feel free to circulate this newsletter, to anyone who you feel may benefit from this information. If you have any questions or need clarification on the issues discussed, please feel free to get in touch with Gail Butt (gail.butt@bccdc.ca) or Sandi Mitchell (sandi.mitchell@bccdc.ca).