

# Syndemic Infectious Diseases Bureau: Viral Hepatitis Surveillance Unit

**CDPH Board of Health Meeting** August 16, 2023

Ashley M. Becht, MPH, CPH Director of Disease Investigations

> **Sylvia Dziemian** Program Director



## • Who we are...

Viral Hepatitis Team & Service Background

## • Who we serve...

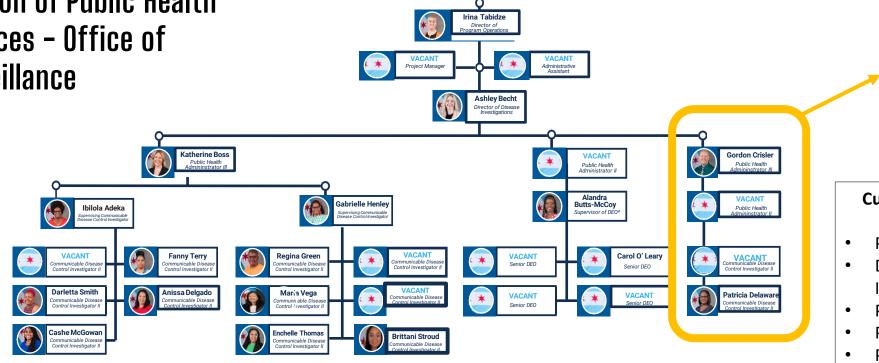
• Epidemiology of Adult Viral Hepatitis in Chicago

## • What we do...

- Transitional Timeline of Key Surveillance Activities
- Prevention & Community-Driven Activities

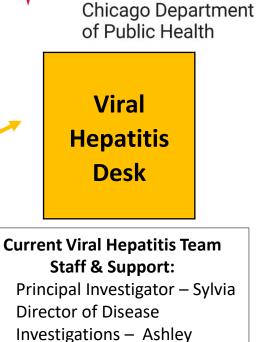
## **Syndemic Infectious Disease Bureau**

**Division of Public Health** Services - Office of Surveillance



David Kern

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**CDPH** 

- PHA III Gordon
- PHA II\* Emily
- PHA II\* Asha
- CDC PH Advisor (Data • Manager) – Lisa

\*contractor

#### PS21-2103-CoAg

Cooperative Agreement – Components 1, 2 and 3 Division of Viral Hepatitis (DOVH)

## **CDPH** Adult Viral Hepatitis Funding Sources

### Centers for Disease Control and Prevention (CDC)

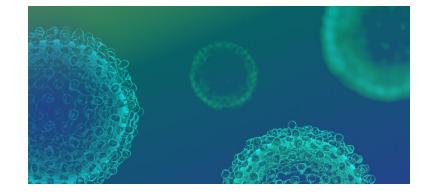
- Total budget: \$544,100
  - Component 1: 200,000
  - Component 2: 115,000
  - Component 3: 229,100
- Staff salaries
- Office supplies and general operations
- Trainings and professional development
- Delegate agency budget

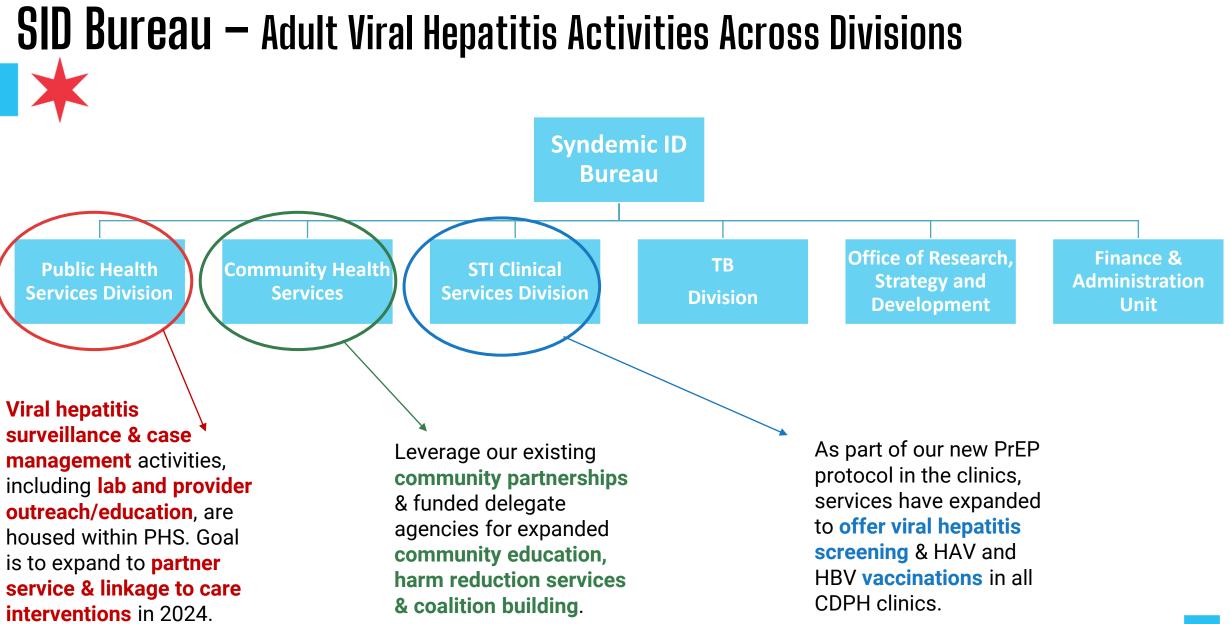
## Additional Support

- In-kind City of Chicago funding
- SID Bureau budgets with overlapping goals and initiatives

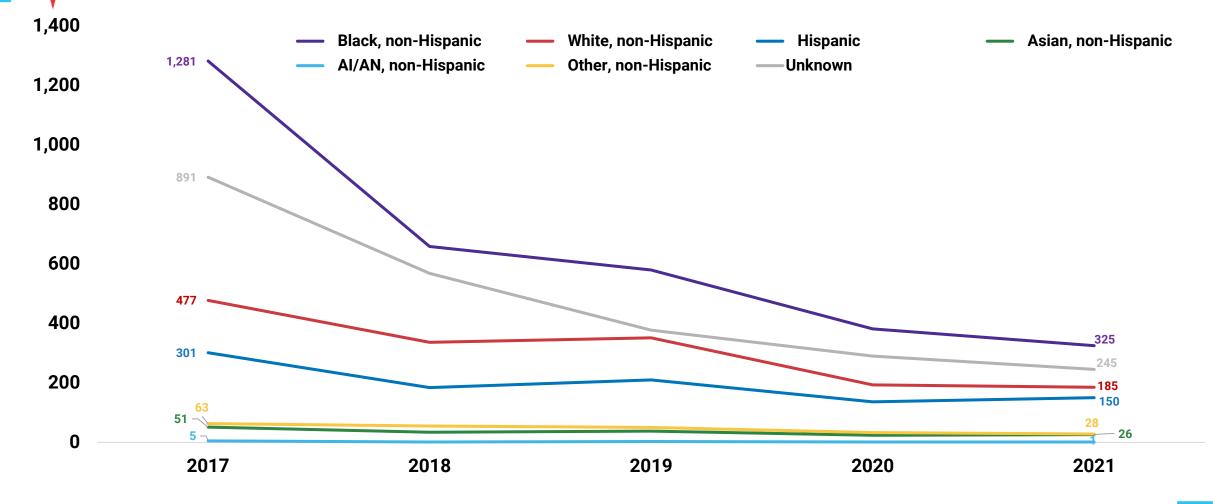
## **CDPH** Adult Viral Hepatitis Activities

- Guided by Centers for Disease Control (CDC) three focus areas
  - Component 1: Surveillance, Outbreak, Monitoring and Response
  - Component 2: Prevention
  - Component 3: Special Projects (new)
    - Prevention, diagnosis, and treatment related the infectious disease consequences of drug use
- Viral hepatitis activities include collaborations with multiple bureaus, desks and offices
  - Syndemic Infectious Diseases (SID) Bureau
  - Disease Control (DC) Bureau
    - Communicable Diseases
    - Immunizations
  - Behavioral Health Bureau
    - Office of Substance Use

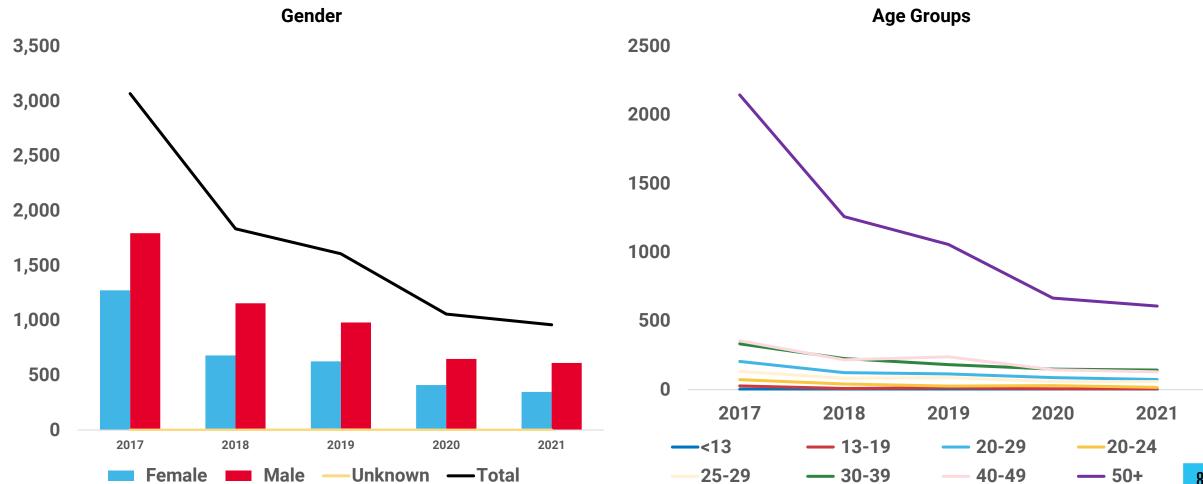




## Hepatitis C Cases by Year of Diagnosis & Race/Ethnicity, Chicago, 2017 - 2021

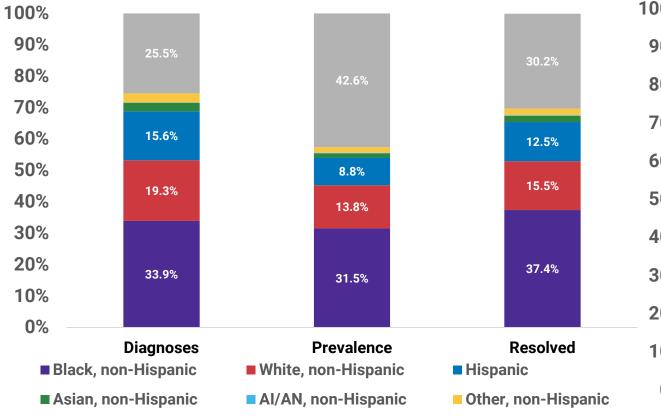


## Hepatitis C Cases by Year of Diagnosis and Gender/Age Group, Chicago, 2017 - 2021

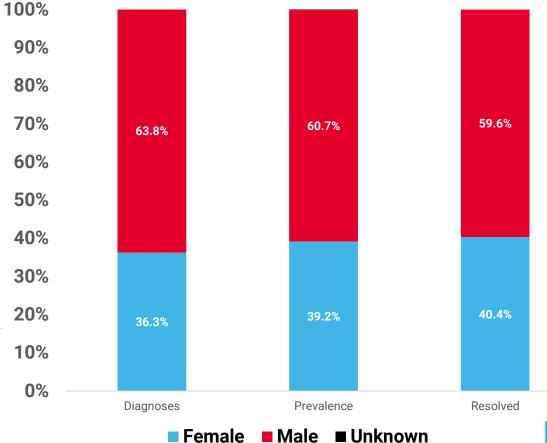


# Viral Hepatitis Epidemiology in Chicago

Newly Reported Diagnoses, People Living with HCV and Resolved Infections by Race/Ethnicity, Chicago, 2021



Newly Reported Diagnoses, People Living with HCV and Resolved Infections by Birth Sex, Chicago, 2021



Unknown

Note: Groups may not total 100% due to rounding. Use caution when interpreting data based on less than 20 events; percent is unreliable. ^AI/AN refers to American Indian/ Alaskan Native.

## 2022 – 2023 Surveillance Transition: Training, System Development, & Data Migration

SID/Disease Control (D Bureau training & detai support started March 2022	ed SID team trained on surveillance DC	members are viral hepatitis activities from Bureau <b>July 2022</b>	developmen	eillance syster It is completed <b>ember 2022</b>	CHIMS for \ Febru n d	ation complete. /H is operationa uary 2023	
across bureaus SID da analysis migrat	April 2022 ta team starts data s, interpretation, and on process of HCV NEDSS data	<b>July 20</b> CDCI team t surveillance a investigation act CD team	akes on and case tivities from	January Cas investigation/ continues in II team finishes in CH	se /surveillance NEDSS while final testing	March 2023 Viral hepatitis B d begins for CHIM continues to surveillance activ INEDSS/CHIMS. improved electro reporti	lata migration IS. SID team conduct rities for VH in Focusing on onic provider

# Prevention & Community-Driven Activities for Viral Hepatitis

### **KEY PREVENTION ACTIVITIES**

### **Component 2 Activities**

Hospital & Provider Assessments

**Community Coalition Efforts** 

**Provider Education & Engagement** 

# What kind of outcomes are we hoping to achieve?

- Improved screening outcomes & education among Chicago providers
- Improved treatment outcomes & retention in care
- Local coalition building to leverage resources across the Chicago viral hepatitis and syndemic landscape

# **Prevention & Community-Driven Activities for Viral Hepatitis**

### KEY COMMUNITY-DRIVEN ACTIVITIES

### **Component 3 Activities**

Rapid Health Services Assessment

Funding a delegate agency to deliver impactful services

Strong focus on people who inject drugs

Services for People Who Use Drugs\*

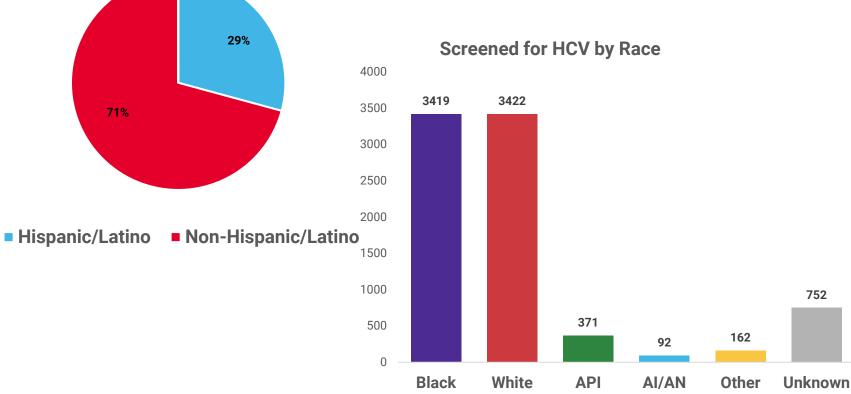
\*Division of CHS funding initiative

# What kind of outcomes are we hoping to achieve?

- A better understanding of the current viral hepatitis healthcare delivery system in Chicago
- Increased VH screening
- Improved treatment outcomes & retention in care
- Overarching goal is to add to the delivery of services and to syndemically approach viral hepatitis as a disease and condition

## Services for People Who Use Drugs (PWUD)

## Screened for HCV by Ethnicity



#### • 8128 Screened for HCV

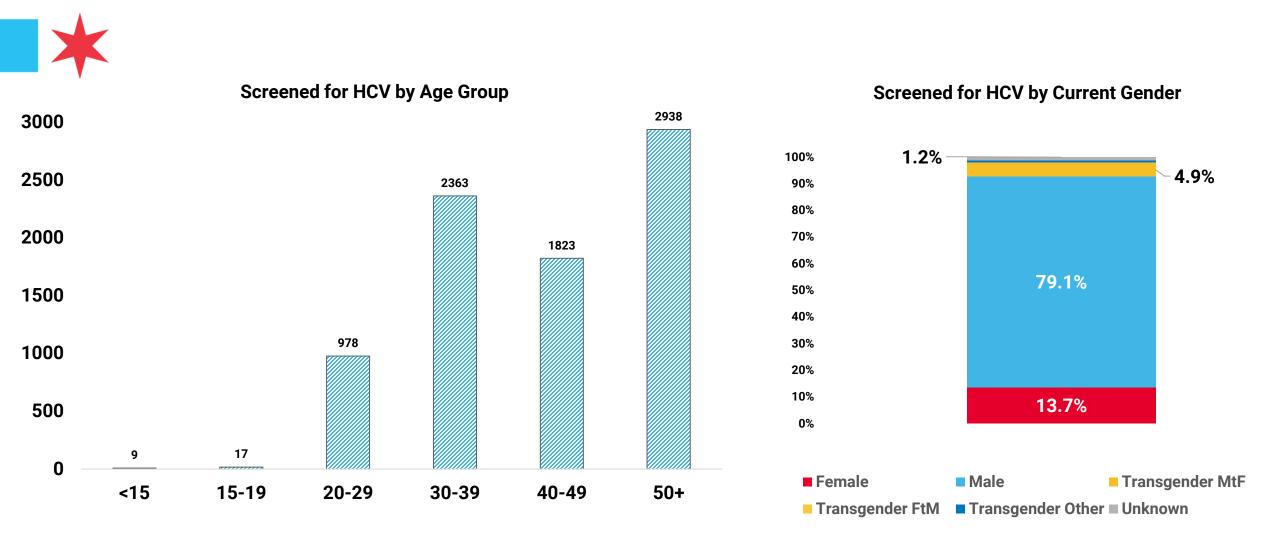
• **60.6%** among gay, bisexual and other men who have sex with men (MSM)

.....

18.0% among heterosexuals

- **2.0%** among people who inject drugs(IDU) and MSM/IDU
- **19.4%** Other risk factor, including unknown and perinatal transmission

## Services for People Who Use Drugs (PWUD)



Priority populations: Black MSM, Latino MSM, Transgender of Color, Black Female, 50+ y.o



- Continue to integrate viral hepatitis activities into SID Bureau operations.
- Collaborate with internal and external stakeholders.
- Build staffing as work evolves.
- Create viral hepatitis elimination plan.
- Work with SID Bureau delegate agencies to further work on infectious disease consequences of drug use.



#### **Viral Hepatitis Surveillance Team**

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Irina Tabidze, MD, MPH Director of Program Operations

Kathleen Ritger, MD, MPH Medical Director, Tuberculosis Program

# Chicago Department of Public Health

#### **David Kern**

Deputy Commissioner, Syndemic ID Bureau



# Thank You!

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