



HCSP FACT SHEET

• HCV POPULATIONS •

HCV in American Prisons

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Forward

This fact sheet will discuss screening, prevalence and treatment of incarcerated people infected with hepatitis C in prisons.

Jails

Jails are funded and staffed by local and state governments. People are housed in jails for being accused of a crime or who are waiting for a trial whether they are innocent or guilty. The length of time that people are held in jails can be up to one year or longer. Jails typically have a more transient population. Jails offer educational, substance abuse, and vocational (work) programs.

Jails do not routinely screen for hepatitis C and seldom, if ever, offer treatment. But jails would be a good place to test and provide referrals to local agencies.

Prisons

People who are convicted of a felony are generally sentenced for a year or more and are sent to a prison. State and federal governments operate prisons or contract with the private prison industry. A person who is convicted of a crime and who is incarcerated in a prison is a felon. Prisons can have a minimum, medium, and maximum security. There are also halfway houses, work related programs, and community restitution programs.

The average length of time a person is incarcerated is a couple of years.

Screening

The Federal Bureau of Prisons (FBOP) recommends opting-out of hepatitis

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The information in this fact sheet is designed to help you understand and manage HCV and is not intended as medical advice. All persons with HCV should consult a medical practitioner for diagnosis and treatment of HCV.

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C testing for all inmates during the prevention baseline visit. See complete guideline https://www.bop.gov/resources/pdfs/hepatitis_c.pdf Screening for hepatitis C in state prisons is not uniform and it is conducted on a state-by-state basis.

Prisons offer an optimal place to test, manage and treat hepatitis C.

Prevalence

Hepatitis C is the most common blood-borne pathogen in the United States and the Correctional Systems. In a study conducted by the Centers for Disease Control and Prevention (CDC) it was estimated that 9.6% to 41.1% of inmates in the prison system are infected with hepatitis C. The CDC took these numbers, averaged them out and estimated the number at 17.4% nationally.

New York and Maryland contributed to the CDC study and noted that their hepatitis C rates in prisons were declining. Two states that were not included in the CDC report, California and Rhode Island, also reported declining rates of hepatitis C infections in prisons.

The Annals of Epidemiology published a study on the ethnic and racial prevalence of the hepatitis C populations in correctional facilities. Non-Hispanic whites had the highest percentage of entrants followed by Hispanics then non-Hispanic Blacks. The racial characteristics reported in the Annals of Epidemiology is in stark contrast to the racial and ethnic make-up of the groups who make up the general prison population. This difference may

reflect the emergence of the new HCV infections from the current opioid epidemic.

There are many reasons that prisons do not treat every prisoner with hepatitis C. In the past the cost of hepatitis C medications, the length of treatment, lack of prison medical staff, and the public reaction to spending large sums of money on the general prisoner health budget.

Treatment

Treatment costs are coming down. Even though the costs are lower they are still a barrier to treating every prisoner.

Length of Treatment

The average length of treatment is now 8 to 12 weeks. This is well within the length of a prison term.

Prison Medical Staff

One strategy to solve the problem of prison medical staff is telemedicine. There have been studies showing that telemedicine can successfully manage and medically treat prisoners. The ease of treatment of hepatitis C, one-pill-once-a-day for 8 to 12 weeks is relatively easy for most patients and easily managed by most medical providers. People with more advanced liver disease will need more care and support that will require an in-house physician that could consult with a telemedicine expert, an in-house expert or a local expert.

Changing Public Opinion

Most people believe that all prisoners are hardened criminals, but many people who are incarcerated

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are convicted for crimes such as using drugs or committing crimes to support their drug use. As previously mentioned, the average time spent in prison is 2 years.

Ex-prisoners are all around us in the community and we are interacting with them on a daily basis.

Treating prisoners accomplishes many goals. If we can treat and cure prisoners we can stop the HCV epidemic from spreading into the community at-large. It will help to lower the future disease burden and overall future health care costs. It will also be a big step to eventually eliminating hepatitis C.

Sources:

- Varan, Aiden K. "Hepatitis C Seroprevalence Among Prison Inmates Since 2001: Still High but Declining" Public Health Reports March-April Volume 129: (2014): 187-195.
- Larney, Sarah "A systematic review and meta-analysis of racial and ethnic disparities of hepatitis C antibody prevalence in United States correctional populations" Annuals of Epidemiology 26 (2016): 570-576.
- He, Tianhua "Prevention of Hepatitis C by Screening and Treatment in U.S. Prisons" Annuals of Internal Medicine (2016): 84-92
- HCV in Prisons: original article appeared in the HCV Advocate newsletter: http://hcvadvocate.org/news/NewsUpdates_pdf/Advocate_2017/advocate0917.pdf

Resources:

**National Hepatitis Corrections Network –
An Initiative of the Hepatitis Education Project**

- <http://www.hcvinprison.org/>
- <http://www.hepeducation.org/>

Prison Policy

- <https://www.prisonpolicy.org>

For more information

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| <ul style="list-style-type: none"> • Americans with Disabilities Act
www.ada.gov • Centers for Disease Control and Prevention
www.cdc.gov | <ul style="list-style-type: none"> • Mayo Clinic
www.mayoclinic.com • MedlinePlus
www.nlm.nih.gov/medlineplus |
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