

NETWORK UPDATE

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Veterans have improved access to treatment for Hepatitis C

By André Kok, VISN 23 Public Affairs Officer

EAGAN, MN –Physicians and other care team members are taking advantage of new medication and dedicated financial resources to reach out and educate veterans about Hepatitis C treatment options leading to high treatment and cured rates for veterans residing in VISN 23.

The Centers for Disease Control and Prevention identify hepatitis C as a liver infection caused by the blood-borne Hepatitis C virus (HCV). They state that for some people, hepatitis C is a short-term illness but for 70%–85% of people who become infected, it becomes a long-term, chronic infection, with an estimate of between 2.7 to 3.9 million chronic cases in the United States.

Due to increased efforts in identifying Veterans who have the infection, the total number of patients identified with Hepatitis C has gone up in the network, from 4,824 in March of 2015 to 5,096 in February of 2016. When Veterans are identified as testing positive for the hepatitis C Virus, they are triaged into different categories for treatment based on the severity of their illness.

A blood test called the Fibrosis-4 produces a FIB score, which can help quantify the impact of the disease on the health of Veterans by estimating the amount of scarring on their liver.

Veterans with an FIB greater than 3.25 are at increased risk of poor health outcomes. This group of patients was targeted for aggressive case management. Of the 1,022 patients in this group in March 2015, 265 have been successfully treated and have improved liver function, 221 are under active treatment. Of the remaining patients, only 26%

remain to be contacted to ensure they are aware of their current options for care.

“Our VISN goal is to offer treatment to all Veterans in this highest risk group for whom it is medically appropriate within the next 6 months,” Said Dr. Brian L. Cook, Acting Chief Medical Officer, VISN 23.

Those Veterans with FIB levels between 2.5 and 3.25 are also considered at increased risk of poor health outcomes, but less so than those with levels of 3.25 or higher. These Veterans will be the next group to have their cases aggressively managed.

“While we are concentrating our efforts on the patients who have the greatest immediate need, our goal is to offer all patients with Hepatitis C infection treatment over the next one and a half years,” said Dr. Cook.

Significant progress has already been made for all Veterans who have the virus, with the total number of those requiring intervention decreasing from 3,724 in March of 2015, to 1,671 in February of 2016.

Successful treatment can rid the Veteran of the virus, significantly improving their quality of life. VA researchers indicate that for every 100 patients who are treated and have the virus eliminated 9-10 deaths attributable to chronic liver damage and 3-4 deaths attributed to liver cancer are prevented.

During the last fiscal year, the network has spent \$80 million on this effort, with another \$31 million planned for this year. Veterans should consult with their primary care managers if they would like to know more about being tested for Hepatitis C and options for treatment.

Second National Access Stand Down Event held

Medical centers around the country and throughout the Midwest Health Care Network participated in the second Stand Down held on February 27, 2016; the first event was November 14, 2015.

The immediate goal of the event was to connect with Veterans that have urgent health care needs, address their needs and reduce the number of Veterans waiting greater than 30-days for urgent care.

According to Dr. David Shulkin, Under Secretary for Health, U.S. Department of Veterans Affairs, "It takes much more than a one-day event to fix our access issues and achieve our goal of providing Veterans same day access for primary care and urgent specialty care. VA's ability to meet the urgent health needs of our Veterans remains a priority for VA and the nation. As long as there is even a single Veteran with an urgent care need that we are not meeting in a timely fashion, we will not be satisfied. Although we have greatly increased access since last June, our demand has also significantly increased, and we still have Veterans waiting longer than they should for care. That's why we're holding another National Access Stand Down."

Upcoming Events

March 1 – Stand Down for Homeless Veterans in Kyle, SD

March 2 – Stand Down for Homeless Veterans in Mission, SD

March 12 – Annual Sioux Falls VA Variety Show

March 17 – Veterans Town Hall in Shakopee, MN

March 29 – Vietnam Veteran Appreciation Day

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VA ophthalmologist Morgan L. Pansegrau, MD, examines a patient in the eye clinic in Minneapolis. (VA Photo by April Eilers)