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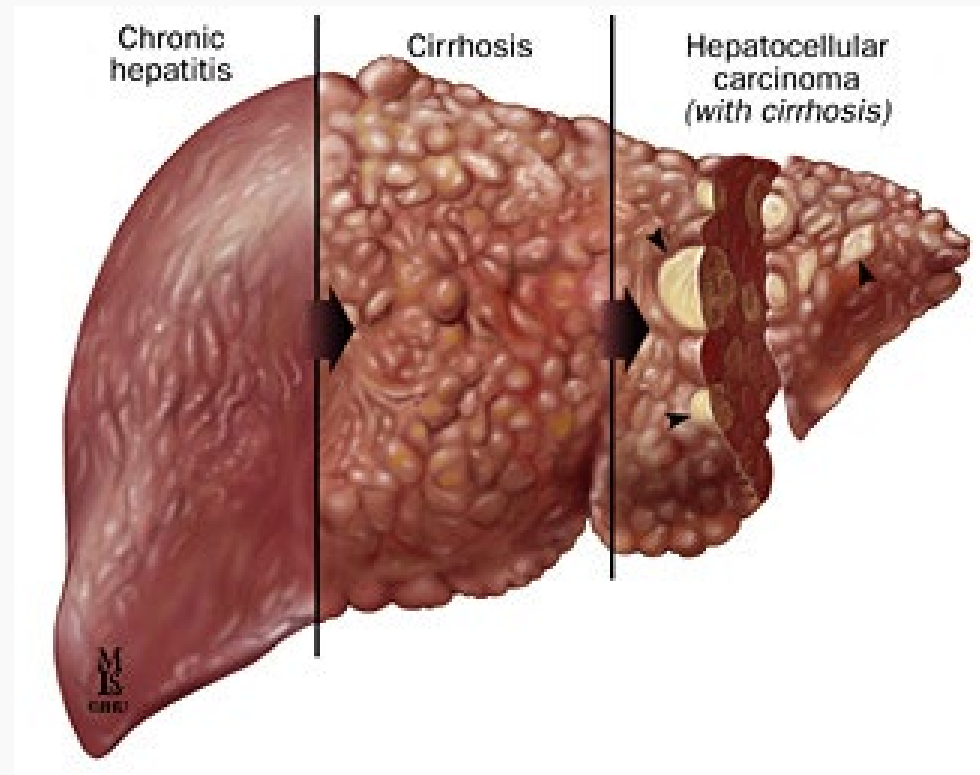
New York State Hepatitis C Elimination Annual Progress Report

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Office of the Medical Director**

2025 HEPATITIS C ELIMINATION PROGRESS REPORT

WHY ARE WE HERE?

HCV REMAINS ONE OF THE TOP INFECTIOUS DISEASE
EPIDEMICS IN OUR COUNTRY

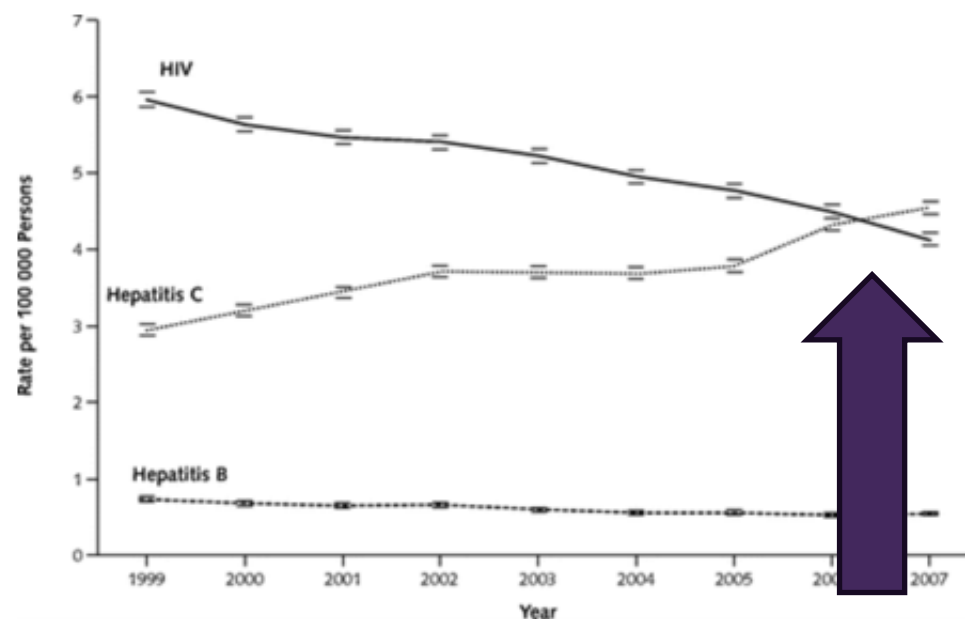


WHERE DID WE COME FROM?

Annals of Internal Medicine

ESTABLISHED IN 1937 BY THE AMERICAN COLLEGE OF PHYSICIANS

The Increasing Burden of Mortality From Viral Hepatitis in the United States Between 1999 and 2007



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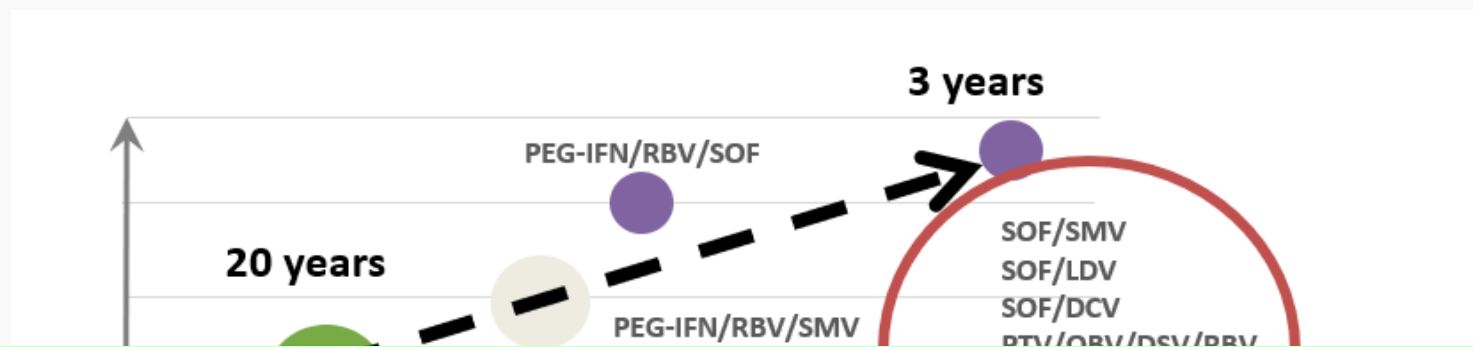


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CONTINUED HCV MORTALITY

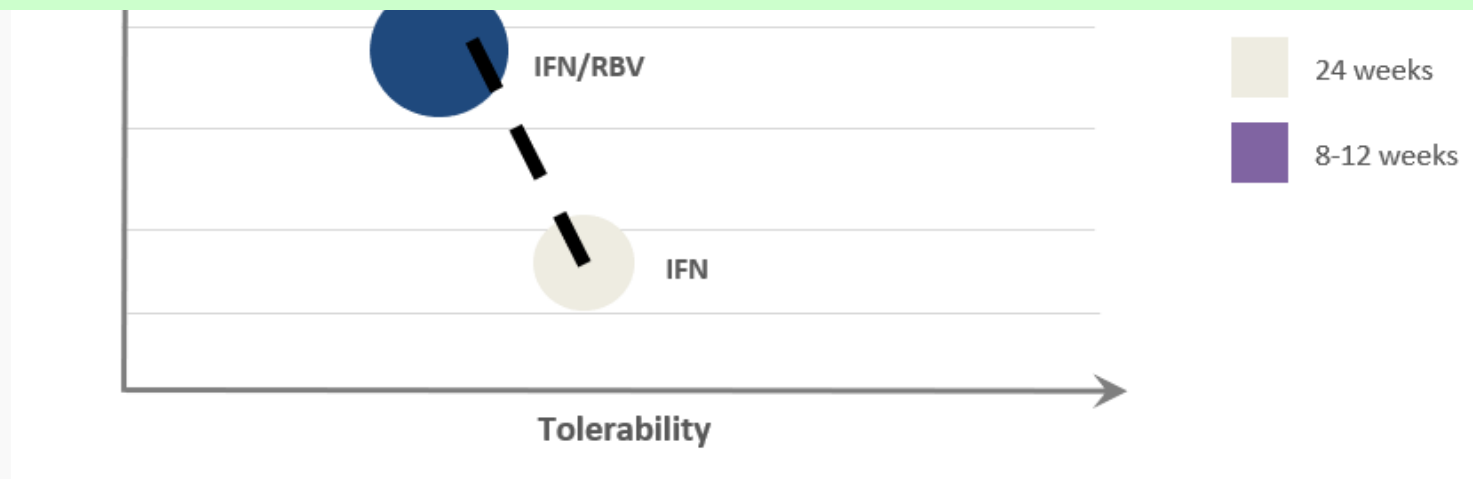
- **More people died of HCV in 2013 than from the top 60 other reportable infectious diseases including HIV, TB, pneumonia.**
- **2022: over 12,000 HCV deaths in the United States**
 - **Almost 3 times as many people died of HCV than HIV**
- **The number of acute HCV cases has doubled since 2014, 129% increase**
- **Chronic HCV affects multiple generations with infections highest among two age groups: 20-39 and 55-79**

THE PROMISE OF HCV TREATMENT

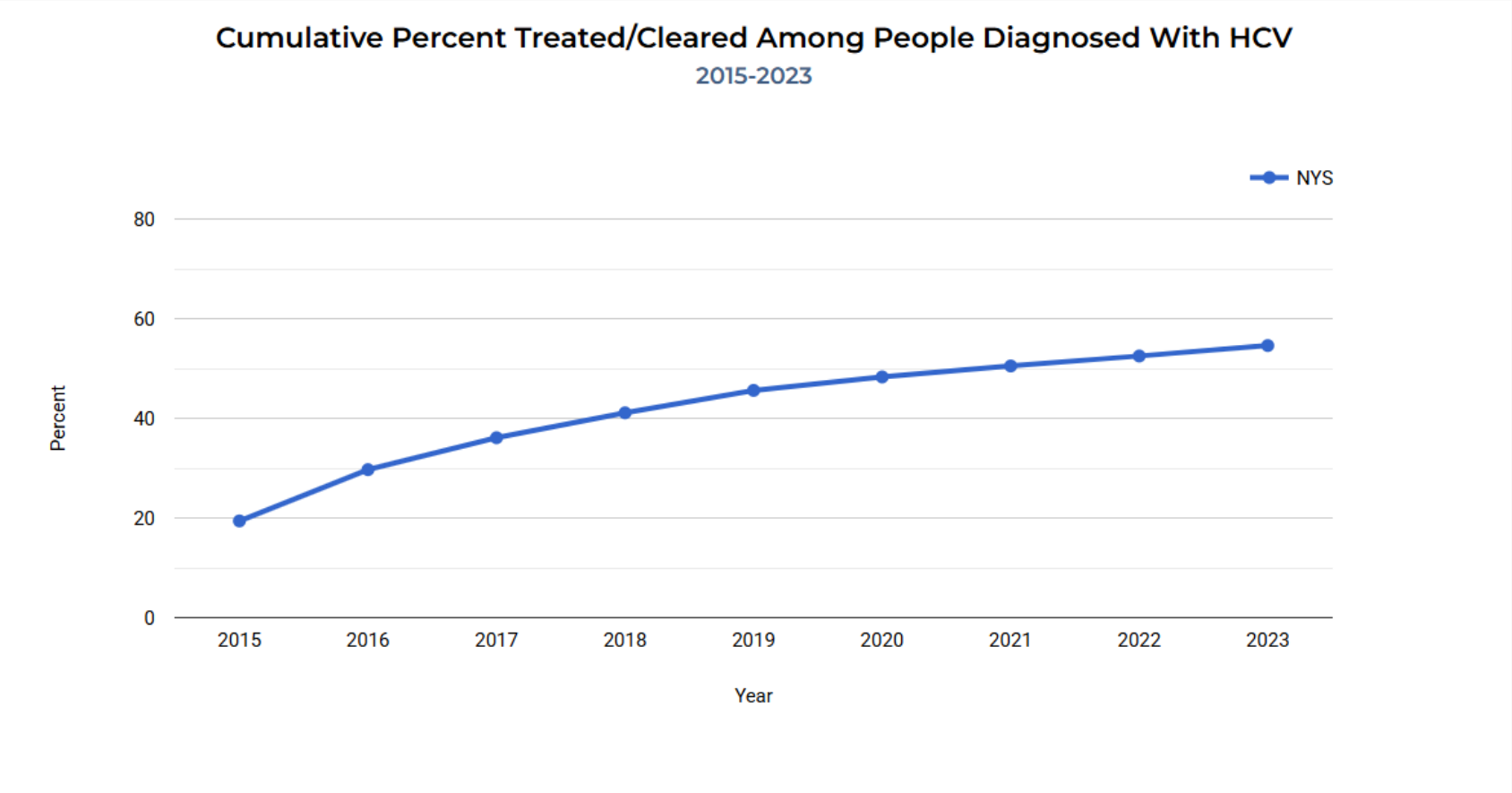


One of the most exciting advances in clinical medicine in decades:

DAA's have cure rates >95% in 8-12 weeks, with few side effects



Not near elimination, NYS 54% cured! Need to do more.



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hcvdashboardny.org

NYS APPROACH

Thinking
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NYS Hepatitis C Elimination Community Consensus Statement

1. Enhance HCV prevention, testing and linkage to care services for PWID, people who are incarcerated, men who have sex with men (MSM), and other populations disproportionately impacted by HCV infection.
2. Expand HCV screening and testing to identify people living with HCV who are unaware of their status and link them to care.
3. Provide access to clinically appropriate medical care and affordable HCV treatment without restrictions and ensure the availability of necessary supportive services for all New Yorkers living with HCV infection.
4. Enhance NYS HCV surveillance, set and track HCV elimination targets, and make this information available to the public.
5. Commit NYS government and elected officials, public health professionals, HCV experts, and industry partners to leadership and ownership of the NYS Plan to Eliminate HCV alongside community members living with and affected by HCV.



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SYNDEMIC APPROACH AND DECENTRALIZATION

Top 5 Priority Populations

- People who use drugs
- Currently or formerly involved in the justice system
- Baby boomers (born between 1945 and 1965)
- Homeless or at risk of becoming homeless
- HIV+ individuals (including HIV/HCV coinfection)

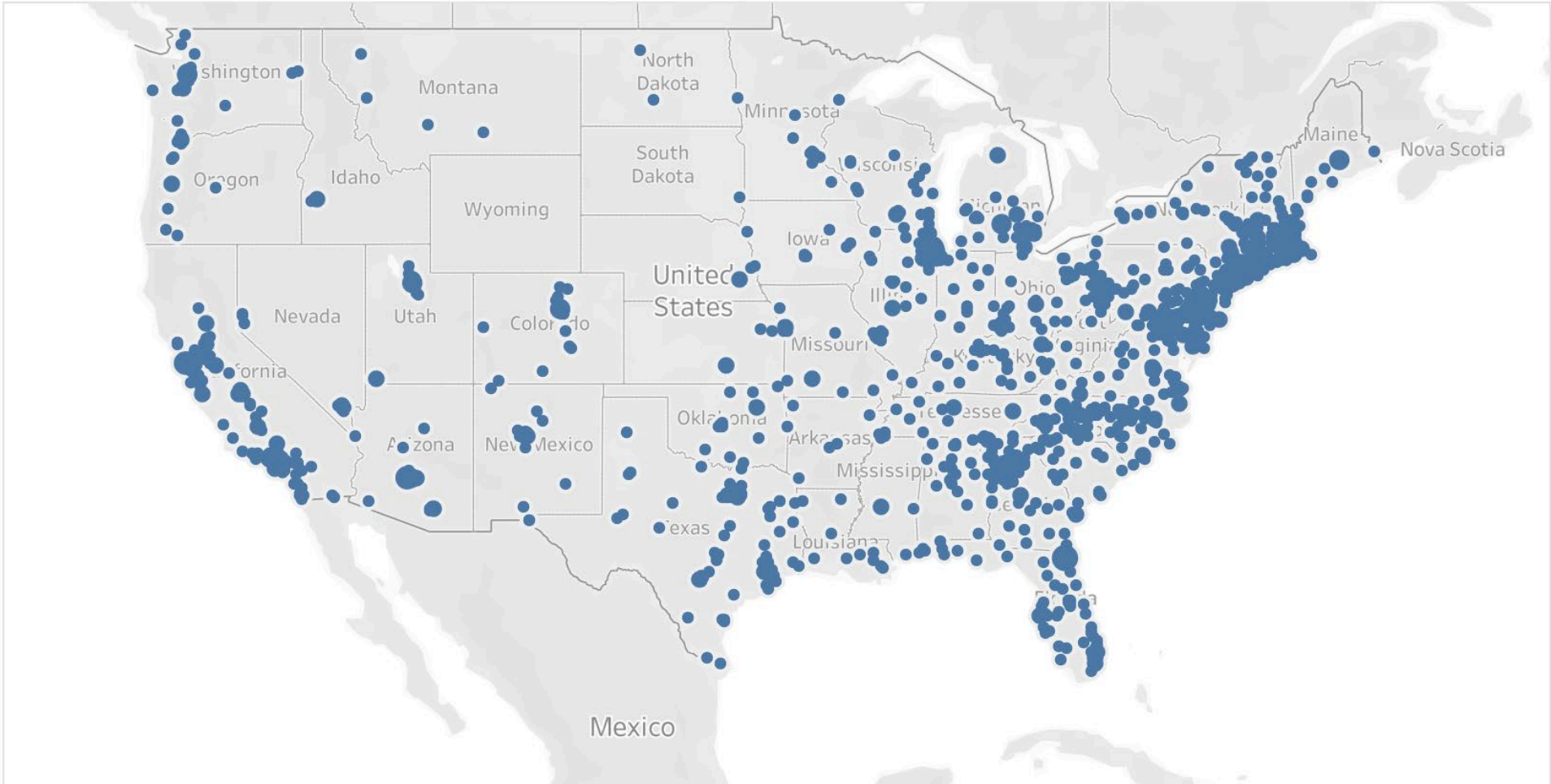
Top 5 Priority Settings

- Correctional facilities, including jails, courthouses, prisons
- Harm reduction programs
- Drug/substance use treatment program sites
- Primary and routine health care offices, community health providers, and federally qualified health centers
- Settings serving the homeless



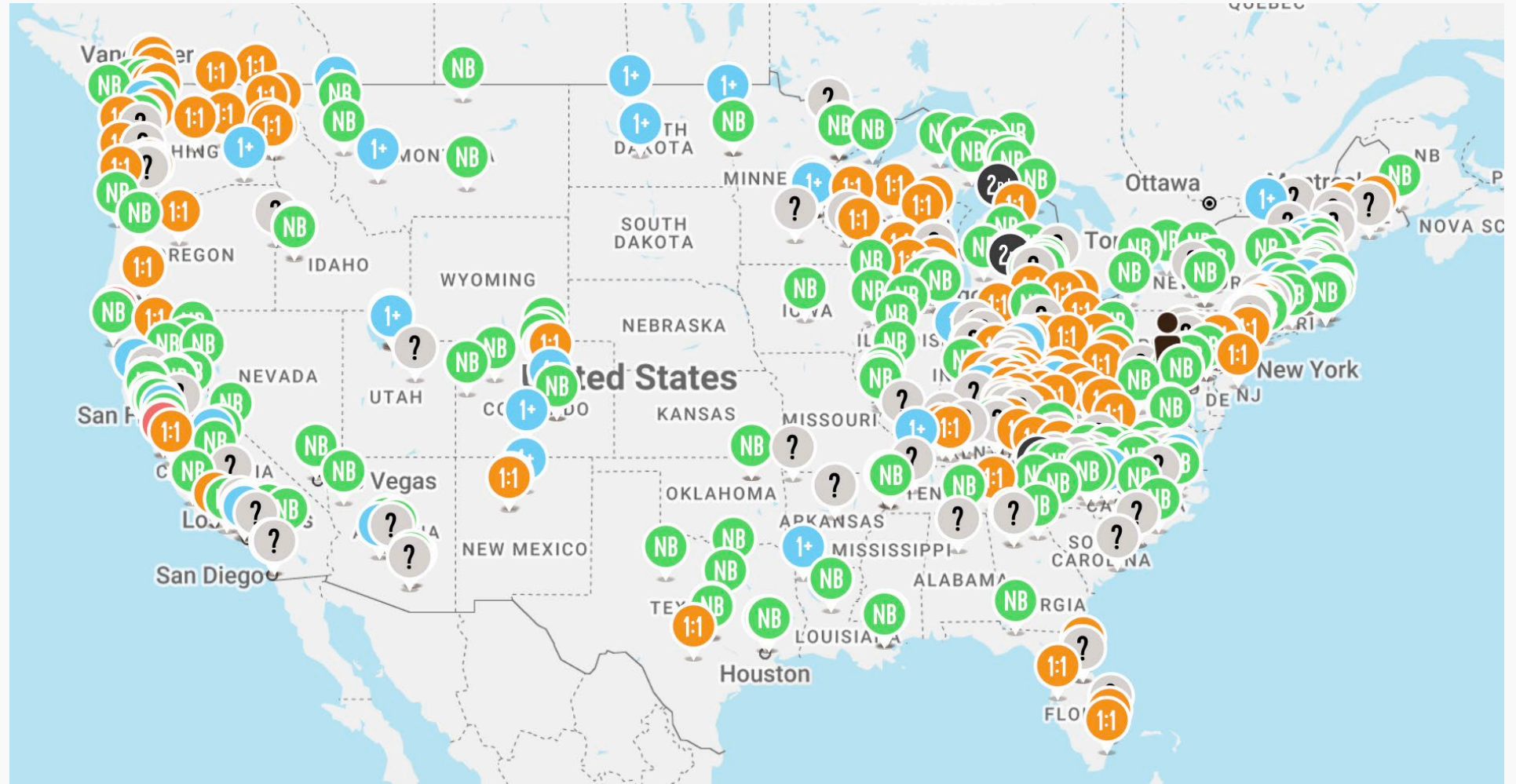
METHADONE CLINICS THROUGHOUT THE US

Methadone Clinics



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SYRINGE SERVICE PROGRAMS THROUGHOUT US



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FQHCs THROUGHOUT THE UNITED STATES



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TODAY'S AGENDA

- Syndemic approaches to Hepatitis C Elimination
- State and City updates on progress towards hepatitis C elimination.
- Innovative and promising practices for patient navigation, improving linkage to care and supporting people living with hepatitis C.
- Live Demonstration: NYS's Hepatitis C Elimination Dashboard.
- Striving Toward Elimination: Advances in Hepatitis C Testing and Treatment.

WELCOME AND ENJOY THE DAY



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