

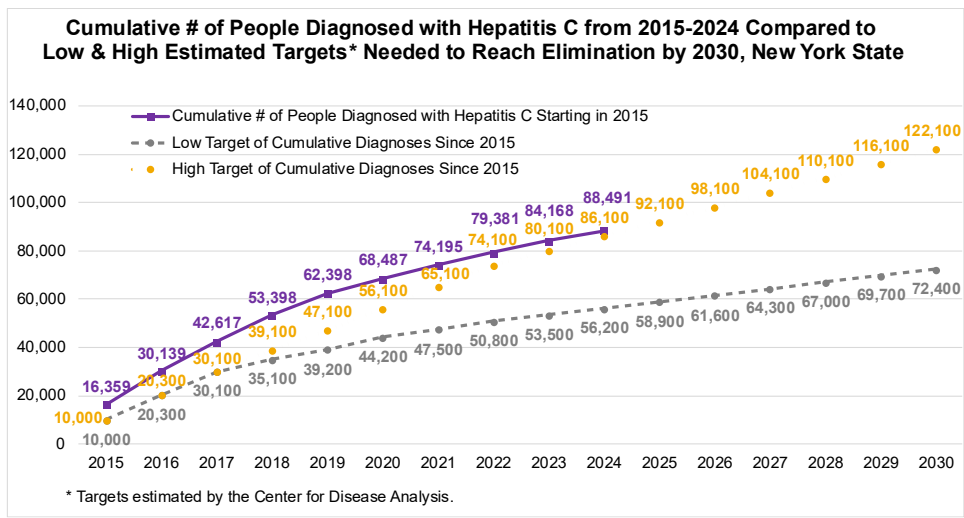
New York State Hepatitis C Elimination Metrics Data Summary: 2024

The 2024 release of hepatitis C elimination metrics data for the New York State Hepatitis C Dashboard addresses the three primary metrics, diagnoses, treatment/clearance, and new hepatitis C infections in people who inject drugs, using data from the statewide Hepatitis Elimination and Epidemiology Dataset. Providing updates to the first release of data which covered the years 2010-2019, this summary describes individuals impacted by hepatitis C from 2010 through 2024 statewide.

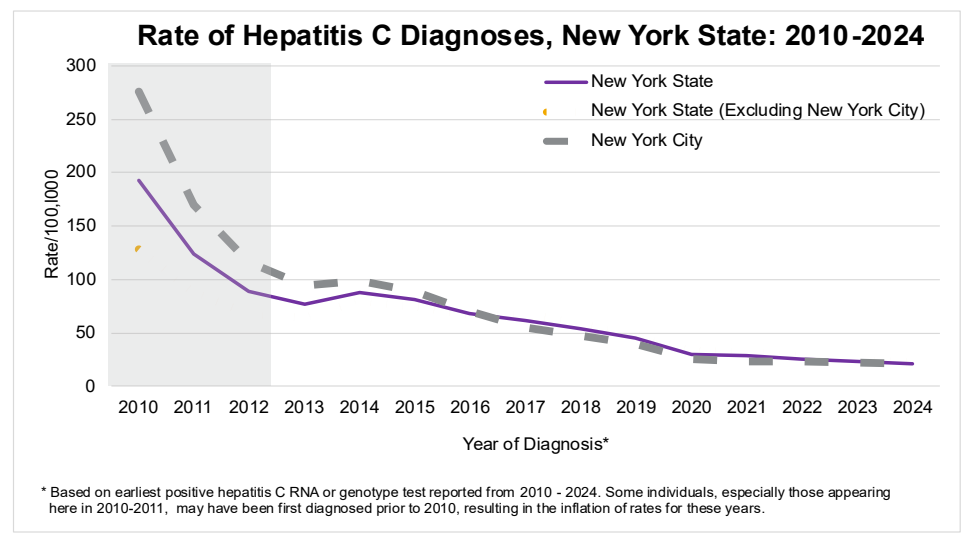
Hepatitis C Diagnoses Metric

The diagnoses metric tracks the number of people newly diagnosed with hepatitis C, per year. People with a positive hepatitis C ribonucleic acid (RNA) or genotype test are considered to be diagnosed with hepatitis C.

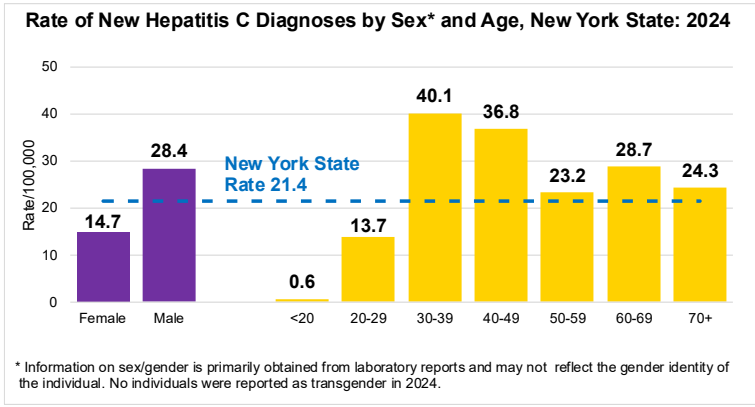
Mathematical modeling was used to estimate the number of people who need to be diagnosed annually, between 2015 and 2030, to reach the elimination goal of diagnosing 90% of people living with hepatitis C, many of whom may not yet know that they have hepatitis C. Based on high and low estimates of the total number of people living with hepatitis C statewide (including both diagnosed and not yet diagnosed individuals), low and high-end estimates of diagnosis targets were generated.



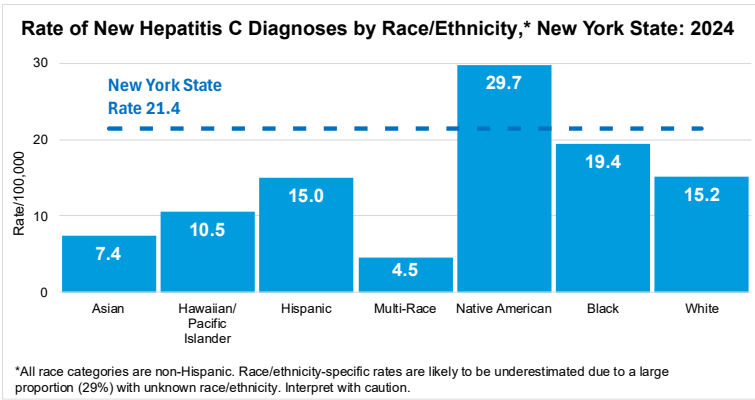
- The solid purple line shows that between 2015 and 2024, 88,491 people were diagnosed with hepatitis C statewide.
- This number exceeds the high-end 2024 target of 86,100.



- Rates of hepatitis C diagnoses continue to decline statewide.
- Since 2019, rates decreased 52.1% statewide, 55.1% outside of New York City and 46.9% in New York City.
- In 2024, 21.4/100,000 people living in New York State were newly diagnosed with hepatitis C. Rates per 100,000 were 21.7 outside of New York City and 21.2 in New York City.



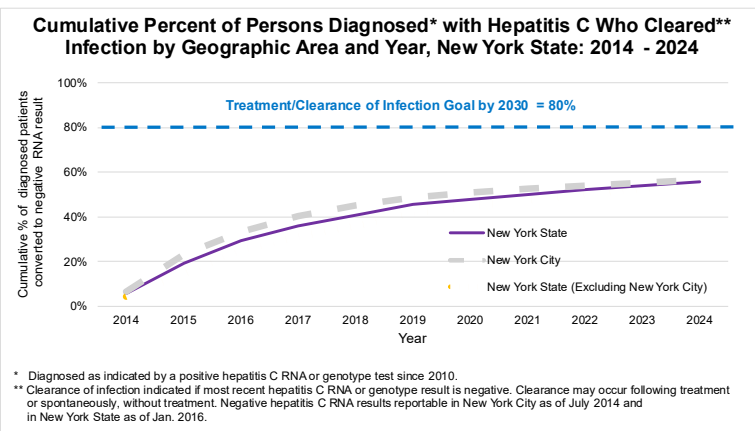
- Diagnoses rates are higher for people reported as males. Statewide, in 2024, rates of new diagnoses per 100,000 were 28.4 for males and 14.7 for females.
- In 2024, rates of new diagnoses per 100,000 were highest in the 30-39 age group (40.1) and lowest in the <20 (0.6) and 20-29 age groups (13.7).
- Between 2019 and 2024, rates of new diagnoses decreased in all age groups, ranging from 14% in the 70+ age group to 76% in the 20-29 age group.



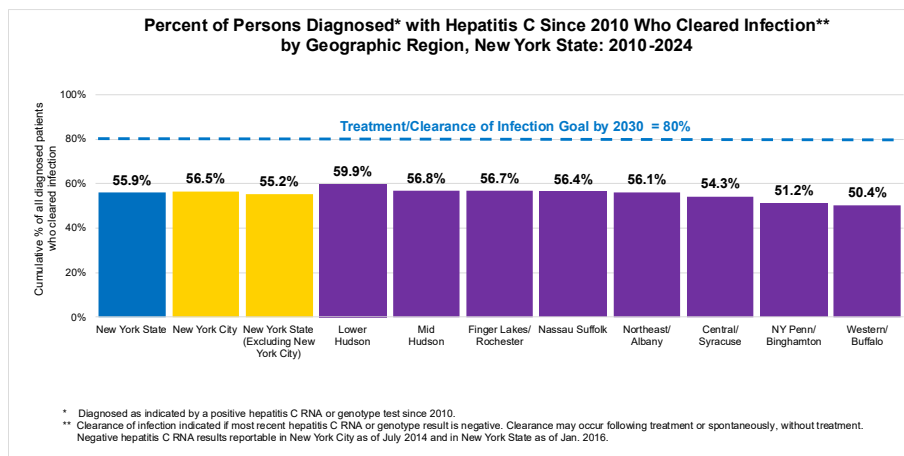
- In 2024, rates of new diagnoses per 100,000 were highest among individuals identified as Native American (29.7) or Black (19.4).
- 39% newly diagnosed individuals were White, 14% Hispanic, 13% Black, 3% Asian. Less than 1% each were Native American, Hawaiian/Pacific Islander or multiracial.
- Because 29% of individuals newly diagnosed in 2024 have unknown race/ethnicity, race/ethnicity-specific numbers are likely to be underestimated and should be interpreted with caution.

Hepatitis C Treatment/Clearance Metric

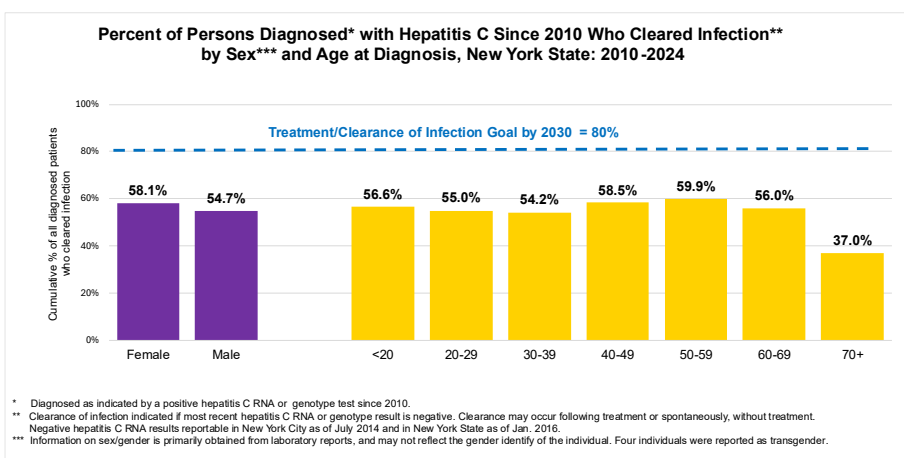
The treatment/clearance metric tracks the number of individuals diagnosed with hepatitis C infection who have evidence of treatment for, or clearance of hepatitis C, per year. Individuals with a positive hepatitis C RNA or genotype test followed by a subsequent negative hepatitis C RNA test or treatment indicated by another data source, without any additional positive hepatitis C RNA or genotype tests, are considered to be treated or cleared of their hepatitis C infection. Negative hepatitis C RNA test results became reportable in New York City in 2014 and statewide in 2016, allowing the identification of people who have cleared their infection, either following treatment, or spontaneously without treatment. The goal is to treat 80% of people diagnosed with hepatitis C by 2030.



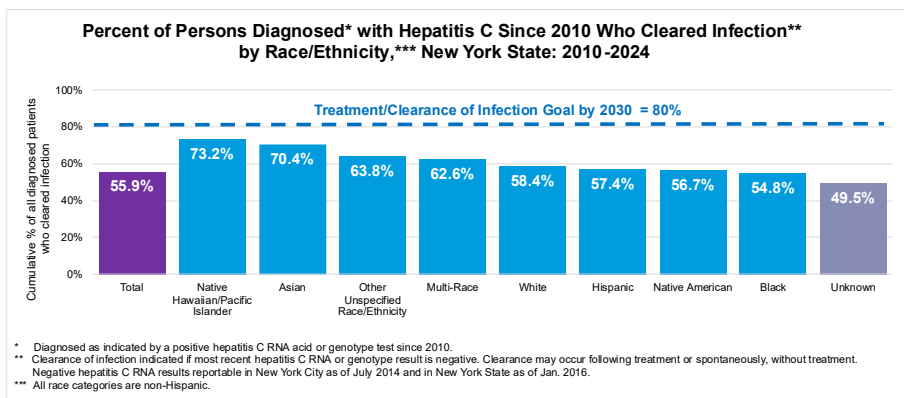
- The percentage of all people diagnosed with hepatitis C since 2010 who were known to have cleared their infection increased statewide from 45.4% in 2019 to 55.9% in 2024.
- Outside of New York City, clearance percentages increased from 41.6% in 2019 to 55.2% in 2024.
- In New York City, clearance percentages increased from 48.8% in 2019 to 56.5% in 2024.



- Clearance percentages vary by geographic area.
- In 2024, they were highest in the Lower and Mid- Hudson regions and lowest in the New York Penn/Binghamton and Western/ Buffalo regions.
- Clearance percentages increased since 2023 in all regions.



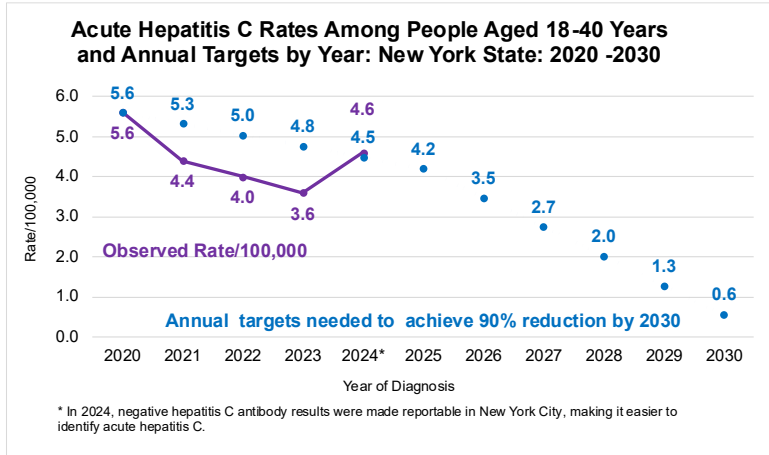
- Statewide, 58.1% of females and 54.7% of males diagnosed with hepatitis C since 2010 cleared their infection by 2024.
- Clearance percentages varied by age at diagnosis and were highest in the 40-59 age groups and lowest in 70+ age group.
- Clearance percentages increased since 2023 in all sex and age groups.



- Statewide, race/ethnicity-specific clearance percentages ranged from 73.2% among individuals identified as Native Hawaiian/Pacific Islanders to 54.8% among those identified as non-Hispanic Black.
- Race/ethnicity-specific clearance percentages were higher than the overall 55.9% for all groups except for non-Hispanic Black individuals.

New Hepatitis C Infections Among People Who Inject Drugs Metric

This metric uses the rate of newly diagnosed acute hepatitis C infections in people 18-40 years of age as a proxy for new infections among people who inject drugs. A diagnosis of acute hepatitis C infection can be a marker of recent infection, and injection drug use is most commonly reported among younger adults newly diagnosed with hepatitis C. The methodology for this metric was adapted from a similar metric described in the Centers for Disease Control and Prevention's (CDC) [2024 Viral Hepatitis National Progress Report](#). Using 2020 as the baseline, the year the most recent CDC acute hepatitis C case definition went into effect, the goal is to achieve a 90% reduction by 2030. The metric is tracked using region-specific rates and annual targets calculated in 2022, the first year this metric was developed.



- The 2024 rate of newly diagnosed acute hepatitis C infections in New York State was 4.6/100,000 among people 18-40 years of age.
- This rate is higher than in 2023 and above the 2024 target of 4.5.
- In 2024, negative hepatitis C antibody results were made reportable in New York City, making it easier to identify acute hepatitis C due to seroconversion. This resulted in more recognized acute infections in 2024.

For more information on New York State's hepatitis C elimination efforts and metrics, visit the New York State Hepatitis C Dashboard at hcvdashboardny.org.