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## **Third Annual L.A. Summit on Hepatitis C Tackles Disease among Incarcerated Populations, HIV Coinfection**

Los Angeles, Calif., November 21, 2005 – The Hepatitis C Task Force for Los Angeles County held its third annual Hepatitis C Summit at the Radisson Wilshire Plaza Hotel on November 17.

The summit provided a forum for education and discussion among local elected and appointed officials, community-based organizations, medical experts and consumers on the emerging hepatitis C epidemic and the impact of the disease on infected individuals and at-risk populations in Los Angeles County. This year's summit tackled the subject of hepatitis C in incarcerated and post-incarcerated populations, along with hepatitis C and HIV coinfection.

The California Department of Corrections estimates that half of the female prison population and 40 percent of male prisoners are infected with the hepatitis C virus (HCV). African Americans are three times more likely and Latinos twice as likely to be infected with hepatitis C as their white counterparts.

“Our aim in this third year is to raise awareness about a potentially deadly disease that lacks community and media attention,” said Alberto Mendoza, Los Angeles County Hepatitis C Task Force co-chair and Southern California regional director for the Drug Policy Alliance. “This summit educates the public, honors key leaders and shares the latest information on this disease.”

Assemblymember Paul Koretz (D-West Hollywood), received an award for his work to combat hepatitis C through sound public policy. A bill sponsored by Koretz, AB 228, which will prohibit health care service plans and insurers from denying coverage for the costs of solid organ or other tissue transplantation based upon the patient's HIV status, was signed into law on September 29.

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The summit also honored Dr. Neva Chauppette, who directs a mobile medical clinic that provides free and comprehensive HIV, hepatitis and STD services for drug abusers who are in and out of treatment.

“We need a more coordinated effort to fight hepatitis C in Los Angeles, which is clearly impacted by this disease,” said Brian Risley, Task Force co-chair and lead treatment educator at AIDS Project Los Angeles. “A Hepatitis C Coordinator would be a great start, someone to liaise with the Task Force, law enforcement, screening and care providers, consumers and county government.”

Panelists on the morning session, “Issues from the HCV Frontline,” discussed addiction and lack of access to clean needles, along with racial disparities within the epidemic. Neva Chauppette moderated the group, which included Peter Anderson of County/USC Medical Center and Martha Saly of the Center for Health Improvement.

The participants included two formerly homeless intravenous drug users, Wayne Kahn and Peter Starks, who issued a plea to treat the addicted humanely and to offer more needle exchange programs in the county. The panel also discussed the need for more client-sensitive care and for providing better resources for incarcerated and post-incarcerated population.

The afternoon panel, “HCV/HIV Coinfection,” highlighted the success story of Tom Stearns, who was hepatitis C and HIV co-infected when received a liver transplant as part of an inter-university organ donor program in California. Stearn’s hepatitis C reemerged after his transplant, but he successfully cleared the virus after his third course of treatment.

Hepatitis C Coinfection with HIV is a significant problem, with some estimates at least 50 percent of people who acquire HIV through injecting drug use are co-infected with hepatitis C, though the number could be as high as 90 percent. HCV infection is more serious in HIV-infected persons, leading to liver damage more quickly and possibly affecting the treatment of HIV infection.

The panelists, moderated by Maryanne Rowerdink, RN, of The Catalyst Foundation, urged people with HIV to first get their HIV under control, and then find out their viral load for hepatitis C and treat it, with the best indicator being a liver biopsy.

“We cannot address the HIV epidemic if we do not address the hepatitis C epidemic,” said L.A. City AIDS Coordinator Stephen David Simon, who delivered the keynote address. “We cannot address either without widespread testing, honest and effective syringe exchange policy, an overhaul of health policy in jail and prison systems, and accessible treatment for all.”

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