



**AAPCHO**

300 Frank H. Ogawa Plaza, Ste. 620  
Oakland, CA 94612  
Tel: (510) 272-9536 Fax: (510) 272-0817  
www.aapcho.org

Policy Brief 2009

# Hepatitis B

Association of Asian Pacific Community Health Organizations

## Background

Approximately 350 million people worldwide are infected with hepatitis B, a deadly disease that often goes undetected despite the fact that it causes about 80% of all primary liver cancers.

Hepatitis B, a liver disease caused by the hepatitis B virus (HBV), can lead to lifelong infection, scarring of the liver, liver cancer, and death. In the U.S., it is estimated that 1 in 20 people will become infected with HBV, and 1 in 4 chronic hepatitis B carriers will die of liver cancer or liver failure.

Within Asian American, Native Hawaiian, and other Pacific Islander (AA & NHOPI) populations, this “silent disease” has had an especially devastating health impact. **AA & NHOPIs comprise more than half of the 2 million estimated hepatitis B carriers in the United States** and, consequently, have the highest rate of liver cancer among all ethnic groups.

## Issues

Although infection is preventable with a safe and effective hepatitis B vaccine, many people live with (and often unknowingly pass on) this chronic disease. Compounding this problem, hepatitis B screening and vaccination rates among AA & NHOPIs are alarmingly low, given the disease’s disproportionate affect on this population. For example, a 2005 study done in New York City found that more than half (56.6%) of AA & NHOPIs had not been previously screened for HBV and 15% of those unscreened individuals were indeed chronically infected with HBV.

Because many chronic hepatitis B carriers show no symptoms and are generally healthy, the disease progresses, is transmitted unknowingly, and often leaves individuals in the late stages of liver cancer or liver disease without warning, too late for medical intervention.

It is critical that AA & NHOPIs get screened and vaccinated for HBV and those individuals who have been exposed to HBV receive appropriate, ongoing medical care. **Increasing the availability of culturally and linguistically appropriate HBV programs will help lower existing barriers** that prevent this population from accessing services, from screening and vaccination to disease management and treatment. **We must also educate health care providers on the prevalence of HBV among AA & NHOPIs**, and replicate successful community-based programs that prevent and manage HBV in these populations.

## Recommendations

- Support and promote community and faith-based efforts to educate and mobilize AA & NHOPI communities at risk for and living with hepatitis B
- Support programs that educate health care providers on hepatitis B’s high prevalence among AA & NHOPIs
- Support the ***Viral Hepatitis and Liver Cancer Control Act of 2009 (H.R. 3974)***, which calls for the prevention, control, and appropriate treatment for hepatitis B through vaccination programs, preventive education, early detection and research. This act also supports expanded outreach and preventative HBV programs specific to AA & NHOPIs and other groups disproportionately affected by hepatitis B.