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**SENATE JOINT RESOLUTION NO. 340**

Senate Amendments in [ ] — January 31, 2001

*Requesting the Department of Health to study the costs and benefits of requiring reporting of chronic Hepatitis and of using the AIDS Drug Assistance Program for treatment of Hepatitis C as an opportunistic infection.*

Patron Prior to Engrossment—Senator Howell

Referred to Committee on Rules

WHEREAS, based on national population and epidemiological estimates, it is believed that as many as 122,000 Virginians may be infected with chronic Hepatitis C, and still more with Hepatitis B that also can become a chronic infection; and

WHEREAS, many of these people do not know that they have a communicable and potentially fatal disease because it often is many years before the symptoms of the disease become apparent; and

WHEREAS, health care providers and emergency personnel are at increased risk of Hepatitis, along with babies born to infected mothers, recipients of blood clotting factors prior to 1987 or blood transfusions prior to 1990, and users of injected street drugs; and

WHEREAS, the Department of Health is authorized and directed to collect information on the incidence of diseases that it determines must be reported; and

WHEREAS, the Board of Health regulations related to reporting of diseases specifies that the regulations "are designed to provide for the uniform reporting of diseases of public health importance...in order that appropriate control measures may be instituted to interrupt the transmission of the disease"; and

WHEREAS, the Center for Disease Control notes that prevention of new Hepatitis C infections "will require the integration of HCV (Hepatitis C Virus) prevention and surveillance activities into current public health infrastructure; and

WHEREAS, the Department of Health only collects information on acute Hepatitis, and does not collect data on chronic Hepatitis, resulting in only 11 cases of Hepatitis C being reported during 1999; and

WHEREAS, the General Assembly in the 2000 Session appropriated funding for the education, testing and treatment of Virginians with Hepatitis; and

WHEREAS, the Department of Health has expanded its AIDS hotline to include information on Hepatitis C, and is beginning several pilot programs for testing of Virginians at high risk of Hepatitis C, but this hotline will collect information only from Virginians who choose to call; and

WHEREAS, without accurate epidemiological information and reporting requirements for chronic Hepatitis, it is unknown if the Commonwealth's policies and resources are appropriate to meet the need; and

WHEREAS, it is estimated that approximately 50 percent of people infected with HIV are also infected with Hepatitis C; and

WHEREAS, recent advances in therapy have dramatically reduced death from HIV; and

WHEREAS, as deaths from AIDS decline, Hepatitis C co-infection has become an increasingly important problem for AIDS patients, leading to significant mortality among people with AIDS; and

WHEREAS, Hepatitis C is treatable and, particularly in the early stages, can be curable; and

WHEREAS, HIV-infected persons who do not receive treatment for Hepatitis C are likely to experience significant illness or even death from Hepatitis C, even when their HIV infection is controlled; and

WHEREAS, the Department of Health administers the Virginia AIDS Drug Assistance Program, a program supported by state and federal funds to provide assistance to people without health insurance who could not otherwise afford the cost of drugs to treat HIV or AIDS; and

WHEREAS, the Virginia AIDS Drug Assistance Program does not include any drugs for the treatment of Hepatitis C; now, therefore, be it

RESOLVED by the Senate, the House of Delegates concurring, That the Department of Health be requested to study the costs and benefits of requiring reporting of chronic Hepatitis and of using the AIDS Drug Assistance Program for treatment of Hepatitis C as an opportunistic infection. The Department, in conducting its study, shall consider comments from local and regional Hepatitis C support groups and health care professionals skilled in the testing, diagnosis and treatment of chronic Hepatitis B and Hepatitis C.

All agencies of the Commonwealth shall provide assistance to the Department for this study, upon

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59 request.

60 The Department of Health shall complete its work in time to submit its findings and  
61 recommendations [ by October 20, 2001, ] to the Governor and the 2002 Session of the General  
62 Assembly as provided in the procedures of the Division of Legislative Automated Systems for the  
63 processing of legislative documents.