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Reporting could help stop hepatitis C

By [LORI NERBONNE](#)

For the Monitor

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Thank you to Meg Heckman for 'My Epidemic,' her moving, candid and sobering December series on hepatitis C (concordmonitor.com/hcv). She reminds us that although it is a silent disease in symptoms, it wreaks havoc with victims' lives. Her selflessness in sharing the personal details of her journey is sure to be far-reaching and gives a voice to so many silent victims.

Meg's story reminded me of another hepatitis C victim I had the pleasure of meeting last year at a workshop I attended at the Centers for Disease Control. Dr. Evelyn Mc-Knight, a lovely soft-spoken audiologist from Fremont, Neb., had come to tell about her life-changing diagnosis of hepatitis C that began in 2001.

While undergoing treatment for stage 3 breast cancer at a local oncology clinic, Evelyn's routine blood testing came back positive for Hepatitis C. Knowing she had none of the risk factors caused confusion and alarm. Shortly after, her husband Tom, a local physician, began noticing that some of his patients had an elevated liver enzyme that is sometimes consistent with hepatitis, so he had them tested. All four tested positive for hep C. These same patients were all being treated for cancer at the same oncology clinic as his wife Evelyn.

Eventually the largest outbreak (99 patients) of hepatitis C in a U.S. health care facility was discovered by the determination of a caring husband and physician, and through sheer coincidence. Since then, several other, much larger health care facility outbreaks have been discovered across the country. Inappropriate and dangerous reuse of common medical equipment like syringes and medication vials are the usual culprits.

Evelyn now works as a passionate patient safety advocate and, with the CDC, has launched a national campaign to educate health-care providers and patients about safe injection practices (honoreform.org).

Most of these outbreaks have occurred in outpatient settings, but no health-care facility is immune. But here's the catch: The trigger for an investigation into these outbreaks often occurs when positive hepatitis C blood tests are reported to a centralized lab at the state public health department. Many states require this type of reporting. New Hampshire does not. This means that a cluster of positive tests or a major outbreak in a health-care facility in New Hampshire would likely go unnoticed, putting many unknowing patients at risk for years.

As a recent Monitor editorial underscores, it will take public health, academic, legislative and health-care leaders from across the state to tackle this problem. For many communicable diseases like hepatitis C, a public health model that includes prevention, early detection, tracking and early intervention would not only save billions of our health-care dollars, but human suffering and many precious lives.

(Lori Nerbonne of Bow is the founder of New Hampshire Patient Voices.)