

May 2015

May is National Hepatitis Awareness Month. An estimated 3.5-5.3 million Americans are living with hepatitis B or hepatitis C, the primary causes of end stage liver disease and liver cancer. Many ANAC members care for patients co-infected with HIV and viral hepatitis, and increasingly are involved in the care of patients mono-infected with viral hepatitis. Moreover, as nurses and other healthcare providers, we provide informal health education to our families, social and faith networks and our larger communities on a regular basis. Now that effective treatments are available and a cure is possible, spreading the word about hepatitis screening, especially for people born between 1945-65 (Hep C) or in Asian and Pacific Islander communities (Hep B) should be part of the conversations we have with others. Hepatitis screening and treatment referrals must be part of routine clinical practice in all of our workplace settings. ANAC members can advocate for that.

Nurses, regardless of practice setting or workplace can play a critical role in addressing **viral hepatitis**. In addition to ANAC members' important and growing role in hepatitis treatment and management, nurses are instrumental in patient and community education, screening, vaccination, infection control and risk reduction counseling and education.

<u>A recent article</u> in *The American Journal of Nursing (AJN)* reviews the epidemiology, natural history, and diagnosis of viral hepatitis; discusses new screening recommendations, assessment tools, and treatments; and, outlines the <u>HHS viral hepatitis action plan</u>, focusing on the role of nurses in prevention and treatment

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