Burden of HCV Infection in the United States

- In the U.S., 2.7 million persons are living with HCV infection.
- In 2011, 64,500 deaths associated with HCV occurred in the U.S.
- Four HCV-infected persons infected and nearly 3 million are at risk of developing cirrhosis.
- Recommendations for testing of demographic groups with increased risk of HCV infection, such as persons born in the years 1945–1965, might improve access to HCV testing.

Current CDC HCV Testing Recommendations

- In 1998, CDC developed recommendations for the prevention and control of HCV infection and hepatitis C and recommended testing to address risk-based transmission methods.
- Recent evidence suggests that in addition to risk-based testing, early HCV screening and treatment could identify previously undiagnosed HCV infections (Figure 1).

METHODS

Evidence Profiles

- Two-stage Review
  - Conduct a literature search for birth-year-based HCV trends and patient-important outcomes.
  - Systematic reviews were conducted on patient-important outcomes.

External Review

- Of 122 persons tested and identified with HCV infection, 36 were treated and were identified with treatment-related SVR (vs. treatment failure).
- Achieving viral eradication was associated with a decreased incidence of developing HCC.

RESULTS

Review of Prevalence Data

- The prevalence of HCV in the U.S. was 0.8% among persons born outside of those years.

Determination of the Strength of the Recommendations

- Quality of the Evidence
  - Based on the GRADE evidence profile, the quality of the evidence was deemed moderate.

DISCUSSION

Implementation of the methodology

- GRADE provides a transparent framework for developing guidelines based on the strength of evidence.
- GRADE considers the quality of evidence using the following criteria:
  1. Risk of bias in the individual studies
  2. Consistency across studies
  3. Directness of evidence
  4. Publication bias
- GRADE provides a consistent approach to the development of evidence-based recommendations.