

## Background

- The Healthcare system has failed to identify and treat many Hepatitis C infected people.
  - Many affected people reside in the inner-city.
  - IV drug use (IVDU) is common in the inner-city
- The CDC recommends birth cohort testing based on NHANES data. However,
  - NHANES evaluated only healthy people
  - Many studies indicate that IVDU is the most important risk factor for HCV infection
- Relative effects of IVDU and birth cohort membership on HCV seropositivity in inner city populations haven't been well documented

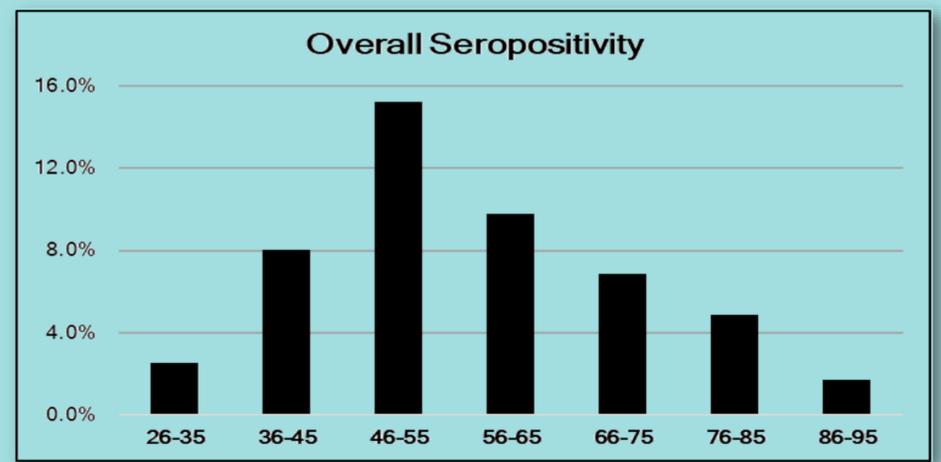
## Aims

- To compare IVDU and membership in the birth cohort on HCV seropositivity in NYC neighborhoods

## Methods

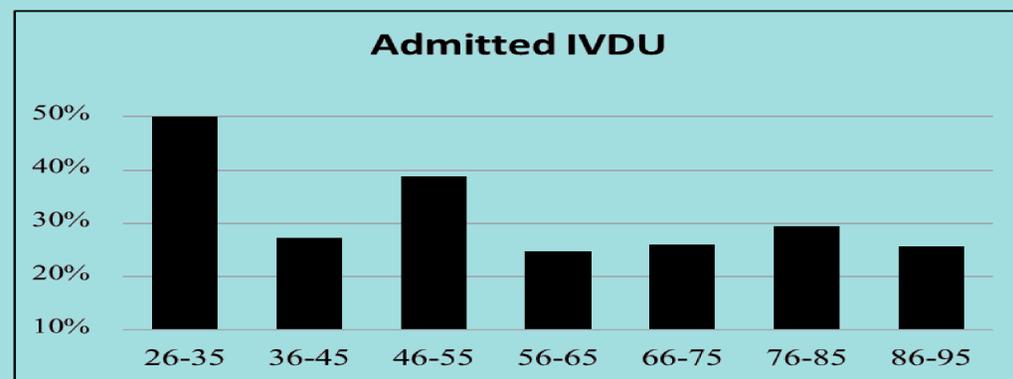
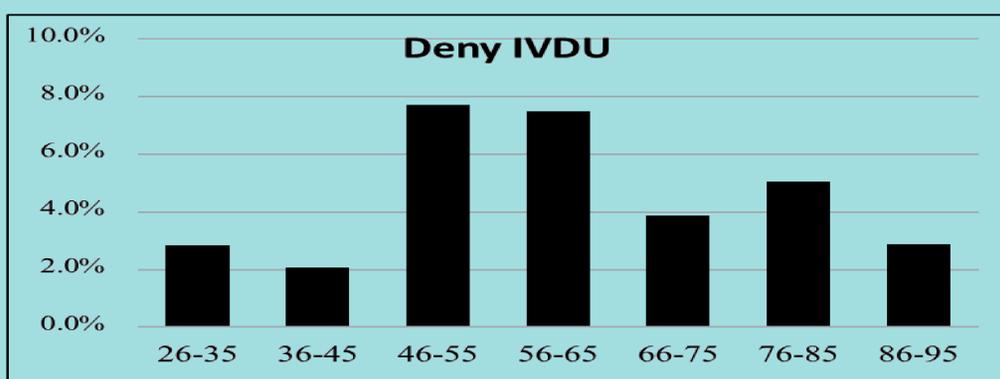
- HCV serotesting using Oraquick in non-medical settings
- Data collected on demographics and IV drug use
- Informed consent, HIPPA authorization, and IRB approval obtained
- Data analyzed by logistic regression

	Number Tested	% Positive
<b>Black Male</b>	1246	12.4%
<b>Black Female</b>	1676	4.4%
<b>Hispanic Male</b>	497	22.1%
<b>Hispanic Female</b>	614	5.4%
<b>Caucasian Male</b>	106	11.3%
<b>Caucasian Female</b>	124	11.3%



## Results

- 4,446 people tested at 239 events.
- 57% Female; 43% Male, mean age 48 yrs
- 45% born between 1945-1965 (birth cohort)
- 9.2% of participants were seropositive
- Among HCV seropositive subjects, 49% admitted to prior IDU, compared to 12.1% of HCV seronegative subjects.
  - 29.5% of admitted IDU HCV+, compared to 6.0% of non-IDU
- In people denying IVDU, age specific prevalence was highest, around 8%, in people born between 1946-1965.
- In people admitting to IVDU, age specific prevalence was >25% in all deciles tested (Note the difference in scale in the y-axis).
- Membership in birth cohort did not predict HCV seropositivity when IV drug use was included in a regression model which also included sex, race, age, and provision of health insurance.



## Conclusion

- HCV prevalence was greater in men than in women of all races tested
- A history of IV drug use is a stronger predictor of seropositivity than were sex, race, age in relation to the birth cohort, or possession of health insurance.
- In inner cities with high rates of illicit drug use, the entire population should be serotested, irrespective of age.