

# A Snapshot of Hepatitis C in Colorado



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**Hepatitis C** is a liver infection caused by the Hepatitis C virus (HCV) and is transmitted through the blood. For some people, HCV is a short-term illness, but for 70% - 85% of people who become infected, it becomes a serious, long-term, chronic infection. The majority of infected persons might not be aware of their infection because they are not clinically ill.<sup>i</sup> HCV is now the leading infectious disease killer in the US, claiming approximately 20,000 American lives in 2014.<sup>iii</sup>

Below is a snapshot of HCV prevalence in Colorado for 2013-2014 using claims data from the Colorado All Payer Claims Database (CO APCD). Data reflects Coloradans with claims filed through commercial payers (excluding self-insured lines of business), Medicaid, and Medicare Advantage. The largest age demographic diagnosed is the baby-boomer generation (51-71 years old) with the majority of individuals living in urban parts of the state. In spite of new, easy to administer treatment options that essentially eliminate symptoms, many Coloradans are still not receiving any treatment for HCV.

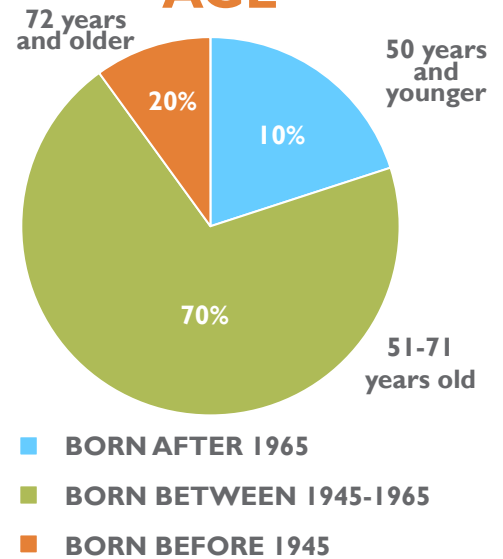
## GENDER



## LOCATION\*



## AGE



## TREATMENT

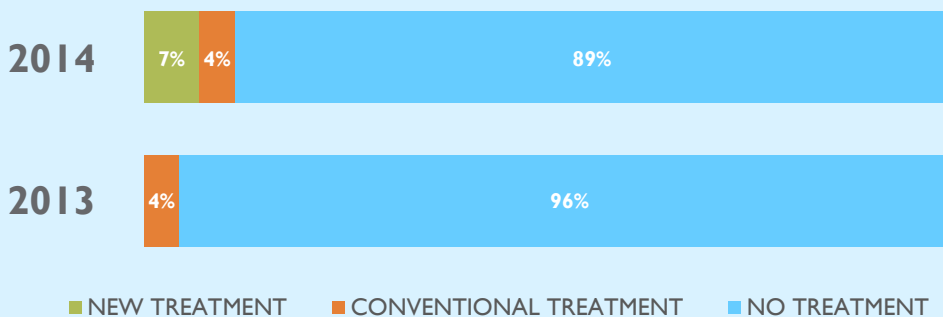


**CONVENTIONAL** - Many older, conventional treatment options available are hard to tolerate, long, and complex. Until recently, the most common treatment was a combination of Pegylated interferon (Peg-IFN), an injectable treatment, and Ribavirin (RBV). In 2011, the release of triple therapy agents with Peg-IFN and RBV somewhat increased effectiveness of treating HCV. However, side effects for Peg-IFN are so significant, that many have to stop using the drug.<sup>ii</sup>



**NEW** - At the end of 2013 and in early 2014, oral drugs became available for the first time that essentially eliminate signs and symptoms of HCV and are much easier to tolerate. Sovaldi was the first new drug to hit the market in 2013, and has been shown to treat most HCV cases successfully, including those with HIV-HCV co-infection, when taken with RBV (an earlier treatment). In 2014, Harvoni became available as the first drug that could cure certain HCV cases without the need for co-treatment.<sup>ii</sup>

## PRE & POST NEW TREATMENT TRENDS, 2013-2014



Although the release of Sovaldi and other curative HCV drugs in recent years have eliminated the complexity and length of treatment, the vast majority of those diagnosed in Colorado remain untreated. In 2014, only 0.005% of individuals diagnosed with HCV moved from conventional treatment methods to new. Understanding what is available and making treatment affordable and accessible is the first step toward reducing HCV in Colorado.

The picture of HCV in Colorado is complex. In future publications, CIVHC will dig deeper into the affected patient populations, efficacy of treatments, and the costs associated with chronic infection.

Developed with input from the Skaggs School of Pharmacy and Pharmaceutical Sciences at the University of Colorado Anschutz Medical Campus.

### Sources

<sup>i</sup> Centers for Disease Control and Prevention (CDC)(2016, April).  
<sup>ii</sup> Hepatitis C - Liver Foundation. (2016, April). Retrieved from: <http://hepc.liverfoundation.org/treatment/the-basics-about-hepatitis-c-treatment/advances-in-medications/>  
<sup>iii</sup> Centers for Disease Control and Prevention. (2016, May). CDC Newsroom: Hepatitis C Kills More Americans than Any Other Infectious Disease. Retrieved from Centers for Disease Control: <http://www.cdc.gov/media/releases/2016/p0504-hepc-mortality.html>  
 \*Rural and Frontier classifications from the Colorado Rural Health Center, have been combined for this graph.