



**Opening Statement  
of  
Chairman Edolphus Towns**

**Committee on Oversight and Government Reform**

**Viral Hepatitis: The Secret Epidemic**

**June 17, 2010**

Today's hearing will examine the secret epidemic of hepatitis, and what can be done to prevent and treat this disease. I call hepatitis the secret epidemic because the attention it receives has not been in proportion to the vast number of Americans it affects.

Hepatitis B and C are among the leading causes of preventable deaths worldwide and are the most common blood-borne infections in the United States. Up to 5.3 million people in the United States are living with chronic hepatitis B or C. But because of the asymptomatic nature of the disease, most people who are infected are unaware until they have developed liver cancer or liver disease many years later. While effective use of the HBV vaccine has greatly reduced new occurrences of the virus, about 43,000 people still develop acute hepatitis each year.

Recently, the hepatitis epidemic has gained new attention due to a study issued by the Institute of Medicine, which found that the current federal approach to battling these diseases is simply not working. The IOM Report suggests a greater need for a federally coordinated response to these diseases, better surveillance, knowledge and awareness, immunization and viral hepatitis services. Today's hearing will review that report, and will explore how to implement its recommendations.

Viral hepatitis affects roughly 2 percent of the entire United States population. If left unchecked, it can cause cirrhosis, liver cancer and liver failure. Several sub-populations are at greater risk of current and new infections, as chronic viral hepatitis disproportionately affects certain minority communities. Chronic hepatitis B is a leading cause of death in Asian Americans, with as many as 1 in 10 living with chronic Hepatitis B.

Hepatitis B is a blood borne disease that is primarily transmitted from mother to child. There is a vaccination for hepatitis B, which if administered early enough, can properly stop the spread of the virus from mother to child. Unfortunately the surveillance and screening measures that are in place now are insufficient, especially in terms of the mother's exposure and need for treatment. Thus, there's a critical need to address this gap.

Hepatitis C is also a blood borne disease. It is primarily transmitted through injection drug use or through unsafe sexual contact. However, others may have been exposed when our blood supply was not filtered for disease prior to 1992. Thus, some people may have been infected by blood

transfusions prior to 1992, or possibly during surgery where the facilities may have been contaminated.

African Americans and Hispanics have the highest rate of hepatitis C infections. Hepatitis C also affects a large segment of baby boomers, a number of whom may have served in the military. Baby boomers account for two out of every three cases of chronic hepatitis C infections in the United States.

What is more alarming is that 75% of people born between 1946 and 1964 are unaware of their status. These statistics trouble me deeply. Too many people in this country are unaware of the serious health effects of hepatitis, as well as the costly nature of going without treatment.

The stigma that is associated with these diseases may play a role in whether or not people come forward to seek help.

The overarching challenge is that many of those infected with both hepatitis B and C are asymptomatic. Nor are they aware that it may be communicated to others in their households. That is why we need to bring greater attention to these diseases – to improve prevention for those not yet infected, and to make sure those who are infected have access to early and consistent treatment that can stop their progression.

I look forward to hearing from all parties involved about their progress on this issue as well as how Congress can play a more pivotal role in making sure their recommendations are implemented.

- 4 -

###