

[\[Categorical Listing\]](#) [\[Numerical Listing\]](#)



THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, DC 20301-1200

16 June 1999

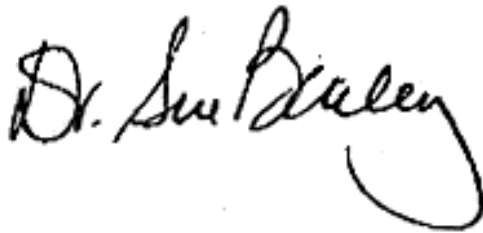
MEMORANDUM FOR: ASSISTANT SECRETARY OF DEFENSE (RESERVE AFFAIRS)
SURGEON GENERAL OF THE ARMY
SURGEON GENERAL OF THE NAVY
SURGEON GENERAL OF THE AIR FORCE

SUBJECT: Screening and Treatment Policy for Hepatitis C Virus

We recently completed a comprehensive study of hepatitis C virus (HCV) in the U.S. military. The study included seroprevalence and seroincidence on over 20,000 randomly selected serum samples from the DoD Serum Repository, an analysis of DoD hospital records of inpatient admissions for acute and chronic viral hepatitis during the last 20 years, a review of published studies related to this infectious disease, and a benefit analysis of different screening strategies. The results of this research are provided in the attached report to Congress. The data clearly demonstrate that military personnel are at low risk for HCV infection. The evidence does not support a requirement at this time to deviate from national screening policy on HCV as established by the Centers for Disease Control and Prevention (CDC). However, we did find a higher prevalence of infection in our older service members. Therefore, I am directing implementation of a targeted risk-based testing program using the attached screening guidelines to screen individuals who are 35 years of age or older and are separating or retiring from service. The results of this screening and subsequent evaluation, counseling, and treatment shall be annotated in the service member's permanent medical record.

Our knowledge on HCV is changing rapidly. On August 10, 1998, I initiated formation of an Interagency Working Group on Hepatitis C Virus. The intent of the working group is to bring the separate agencies closer together and work toward development of appropriate strategies to both prevent new infections and minimize the impact of current HCV infections on our civilian and military populations. The working group is a forum to discuss issues related to hepatitis C of common interest to the various agencies and promote cooperation and collaboration regarding clinical and research initiatives. Each Service has a representative on this work group. A list of Service representatives is attached. These individuals will provide access to the most recent guidance on screening and treatment. The National Institutes of Health and CDC maintain Internet web sites containing current information on HCV. The site addresses are linked to the Military Health System Internet site or are available directly at <http://www.hepnet.com/nih/contents.html> or <http://www.cdc.gov/ncidod/diseases/hepatitis/c/index.htm>, respectively.

I will reevaluate the requirement for continued targeted risk-based screening and testing as we continue to monitor the natural history of HCV in our military population. My point of contact is LtCol James R. Riddle, USAF, BSC, who may be reached at (703) 681-1703, ext. 5211.



Dr. Sue Bailey

HA Policy 99-00016

Attachments:

As stated

Hepatitis C Virus (HCV) Antibody Screening

According to the Centers for Disease Control and Prevention (CDC), testing should be offered routinely to persons most likely to be infected with HCV who might require medical management, and testing should be accompanied by appropriate counseling and medical follow-up. (Recommendations for Prevention and Control of Hepatitis C Virus (HCV) Infection and HCV-Related Chronic Disease, Morbidity and Mortality Weekly Reports, October 16, 1998 / Vol. 47 / No. RR-19.) In addition, anyone who wishes to know or is concerned regarding their HCV-infection status should be provided the opportunity for counseling, testing, and appropriate follow-up. The determination of which persons are at risk to recommend for routine testing is based on various considerations, including a known epidemiologic relationship between a risk factor and acquiring HCV infection, prevalence of risk behavior or characteristic in the population, prevalence of infection among those with a risk behavior or characteristic, and the need for persons with a recognized exposure to be evaluated for infection.

ACTION:

To determine the need for hepatitis C screening, the following statement will be administered and placed in the medical record for all Service personnel 35 years of age or older who separate or retire from military service.

Individuals who answer "yes" and want to be screened for HCV will receive testing for HCV antibody, including appropriate confirmatory testing. An individual does not have to specify a particular risk factor to justify screening.

If HCV positive, the individual will receive appropriate clinical evaluation and treatment and receive counseling on lifestyle modifications and measures to protect others from infection.

Hepatitis C is transmitted primarily by injections of contaminated blood. The following are the possible sources of hepatitis C infection. If you can answer "yes" to any of these risk factors, you should receive a simple blood test to determine if you could have hepatitis C.

- **Receiving a transfusion of blood or blood products before 1992**

- Ever injecting illegal drugs, including use once many years ago
- Receiving clotting factor concentrates produced before 1987
- Having chronic (long-term) hemodialysis
- Being told that you have persistently abnormal liver enzyme tests (alanine aminotransferase) or an unexplained liver disease
- Receiving an organ transplant before July 1992
- Having a needlestick, sharps or mucosal exposure to potentially HCV-infected blood as part of your occupational duties and not been previously evaluated for HCV infection

If you consider yourself at risk, based on an exposure to a possible source of hepatitis C virus, you should have a simple blood test for hepatitis C infection (HCV antibody test). You may request HCV testing even if you don't have a specific risk factor for infection. You will not be asked to identify any specific risk factors to justify HCV testing.

If the test is positive, you will receive a medical evaluation to confirm HCV infection, determine your need for specific treatments, and be provided counseling on lifestyle modifications and steps to protect others from infection.

Circle your response below.

No -- I do not want to be tested for hepatitis C

Yes -- I want to be tested for hepatitis C

SIGNATURE

DATE

Service Representatives to the Interagency Hepatitis C Workgroup

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Last update: 7/14/1999