



May 19, 2010

Dear Colleagues,

Every May we observe [Hepatitis Awareness Month](#) and on May 19th [World Hepatitis Day](#). May 19th is also [National Asian and Pacific Islander \(API\) HIV/AIDS Awareness Day](#). On this day we recognize the devastating impact of these diseases globally; their disproportionate burden upon communities of color; the hope and promise of new developments in prevention, treatment, and care; and the need for mobilization within communities across America.

Greater attention to viral hepatitis and its crippling health effects is essential to improve the health of an estimated 4.5 million persons with chronic hepatitis B or hepatitis C, which together account for the major cause of chronic liver disease and liver cancer. An estimated 15,000 people die from these diseases each year. Globally, viral hepatitis causes more than three-fourths of primary liver cancers, making the disease the third leading cause of cancer deaths in the world. To learn more about viral hepatitis and liver cancer, please see our recent *MMWR* article, [Hepatocellular Carcinoma – United States, 2001-2006](#).

Despite these devastating consequences, up to 65% of persons with chronic hepatitis B and 75% of persons with chronic hepatitis C don't know they are infected. Many people with viral hepatitis live without symptoms for years unaware that severe liver damage has occurred. These numbers are staggering and the consequences are unacceptable, especially when we know prevention is possible through screening, treatment, and care.

The federal government is working to reduce chronic viral hepatitis among all U.S. populations. Howard Koh, MD, MPH, Assistant Secretary for Health, U.S. Department of Health and Human Services, has convened an intradepartmental viral hepatitis working group to improve the public health response to this disease and the health outcome.

This year, on World Hepatitis Day, Dr. John Ward, Director, CDC's Division of Viral Hepatitis is participating in a meeting sponsored by the [HHS Office of Minority Health](#), the Association of Asian Pacific Community Health Organizations, the National Alliance of State and Territorial AIDS Directors, and the National Viral Hepatitis Roundtable. Along with other leaders from various organizations and the White House, this event is intended to build momentum in efforts to reduce chronic hepatitis B and C in specific groups including African American, Asian American, Latino, and Pacific Islander communities. As well, Dr. Koh is showing his support through the release of a [World Hepatitis Day](#) video message, and CDC is releasing two podcasts on World Hepatitis Day featuring information on the [Institute of Medicine's report on viral hepatitis](#) and [hepatitis in the United States](#). Also, please take time to read the latest entry of the [Health Protection Perspectives Blog](#), with Dr. John Ward as this month's guest blogger.

In recent years, the number of HIV/AIDS diagnoses among Asians and Pacific Islanders has increased. In 2007, approximately 500 Asians, Native Hawaiians and Pacific Islanders were given a diagnosis of HIV/AIDS in the 34 states with confidential name-based HIV infection reporting. The 2010 theme of Asian and Pacific Islander HIV/AIDS Awareness Day is “Saving face can't make you safe. Talk about HIV—for me, for you, for everyone.” Saving face is a common cultural norm among Asians and Pacific Islanders that contributes to silence around talking about sex, HIV, and safer sex practices. On this day, many will join together to break that silence. Dr. Koh is again actively involved and has penned a guest blog to be posted on May 19 on the [Office of National AIDS Policy](#) website and [AIDS.gov](#).

Commemorating World Hepatitis and National API HIV/AIDS Awareness Days on May 19 reminds us that in many communities and in many settings around the country, these diseases may occur simultaneously with adverse consequences to those infected and affected by these conditions. This emphasizes the importance of understanding overlapping epidemics or syndemics, and the need for us to maximize opportunities for prevention, screening, and treatment of these conditions through the promotion of improved program collaboration and appropriate service integration. CDC is committed to ensuring that services are delivered more efficiently and health benefits maximized for persons accessing prevention services for HIV/AIDS, viral hepatitis, STDs, and TB. By combining, streamlining, and enhancing prevention services, we can maximize opportunities to screen, test, treat, or vaccinate those in need of these services and consequently improve the health of populations negatively affected by multiple diseases. This focus is critical as we work to adapt and keep pace with changes in disease epidemiology and new technologies.

Observance days are a time to mobilize and reflect on the drivers of these epidemics, their impact on the lives of so many at home and abroad, and what we can all do to reenergize and redouble our efforts to control them and improve the health of the people we serve. I would like to thank all of you for your continued commitment to our work in disease prevention and health promotion for all of our focus diseases.

Sincerely,

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