Oregon Promotes Peer-Supported Services to Combat Hepatitis C

State officials aim to increase community-based screenings, prevention and treatment services for most vulnerable populations.

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New data show Oregon's hepatitis C virus (HCV) rates are among the worst in the country, prompting health officials to expand community-based screenings, prevention and treatment, according to an Oregon Health Authority (OHA) news release.

The 2023 Viral Hepatitis Surveillance Report and 2025 Viral Hepatitis National Progress Report by the Centers for Disease Control and Prevention (CDC) found that people in Oregon are about 2.7 times more likely to die of HVC compared with residents of other states.

HCV is a contagious but curable blood-borne virus that that can cause lifelong liver infection, liver fibrosis, cirrhosis, liver cancer, liver failure and death.

Although there is a vaccine for hepatitis A and B, there isn't one for HCV, so avoiding exposure, timely testing and prompt treatment are the best ways to prevent infection and its complications.

"Hepatitis C is common, causes serious illness and leads to a lot of hospitalizations and deaths. The good news is that we can now treat it and spare people a lot of suffering," said Paul Cieslak, MD, medical director for communicable diseases and immunizations at OHA's public health division, in the release.

According to the news release, the CDC's HCV data for Oregon found that:

- People who use illicit drugs run the highest risk of contracting HCV;

- HCV is most common in people 20 to 29 years old;
- Black, American Indian and Alaska Native populations are twice as likely to contract HCV compared with the state average.

“My hope is that public health can play the important role of linking people with hepatitis C to appropriate care,” Cieslak said.

Guidelines now recommend that all adults should be tested for HCV at least once. Women should be tested during each pregnancy, and people with ongoing risk should be tested regularly. This includes people who inject drugs, people living with HIV and gay and bisexual men who take HIV pre-exposure prophylaxis (PrEP).

Today, HCV treatment is easier and shorter than ever before; indeed, most people can be cured with a brief course of combination antiviral therapy. The medications are generally well tolerated, and more than 90% of treated people achieve a sustained virological response, meaning continued undetectable virus 12 or 24 months after completing therapy.

A study published earlier this year showed that a combination of peer support services and telehealth led to significant success in treating HCV in Oregon. Cieslak said he hopes to implement these peer-supported services across the state.

Boosting awareness and education about prevention, risks and preventive health services is also part of OHA’s 2024–2027 Strategic Plan, which aims to address health inequities.

Additional resources for bolstering community-based HCV screening, prevention and treatment would involve:

- Developing proven peer-supported services;
- Connecting those with HCV to lifesaving care;
- Training and assisting communities and health care partners in developing systems to eliminate HCV among affected populations;
- Developing systems at the state and local levels to track progress from testing through cure.

To read more, click #Hepatitis C. There, you'll see headlines such as "Senators Introduce Cure Hepatitis C Act to Increase Access to Treatment," "FDA Approves Mavyret for Acute Hepatitis C" and "Half of Medicaid Beneficiaries With Hep C Had at Least One Comorbidity."

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