



The Cherokee Nation and Hepatitis C Elimination

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It's no secret that the world of viral hepatitis is fraught with health disparities. Policy advocates and community organizations have worked tirelessly to expand screening, linkage to care, and access to treatment for disproportionately affected communities, including people who inject drugs, Asian Americans and Pacific Islanders, Baby Boomers, and immigrant and refugee populations.

Sadly, the Native American population has emerged as a community devastated by the hepatitis C virus (HCV). Clinic-based studies frequently find a high prevalence of HCV infection in Native American populations, though the proportion is often unknown due to lack of surveillance data. The scattered case studies available place HCV prevalence in Native American populations anywhere from [6.9% to 24.1%](#)!

Native Americans living with hepatitis C are twice as likely to die from hepatitis C than non-Native Americans in the United States. [According to CDC](#), in 2011, Native Americans had the highest mortality rates of persons with HCV by race or ethnicity.

This is a pressing issue for those working in viral hepatitis, and NVHR is committed to highlighting health disparities in disproportionately impacted communities. In mid-March, we hosted a webinar titled [Innovative Strategies for Addressing Hepatitis C in Indian Country](#), where we brought three advocates together from diverse backgrounds to discuss tribal efforts to implement harm reduction strategies and pursue HCV elimination in Native American communities.

One of our panelists, Dr. Jorge Mera, is the Director of Infectious Diseases for Cherokee Nation Health Services in Oklahoma. The Cherokee nation reports that their HCV infection rates were five times higher than any other racial or ethnic group in the United States. For these reasons, they have made [eliminating hepatitis C](#) one of their top public health priorities.

Dr. Mera was also featured in a recent [PBS article](#) outlining the Cherokee nation's process behind the HCV elimination goal.

This momentum began when Cherokee Nation officials received a grant to begin working with the University of Oklahoma, the Oklahoma State Health Department, and federal health officials to launch an initiative to tackle hepatitis C through screening efforts and using the latest

pharmaceutical advances.

As the federal government is responsible for providing healthcare for [all Native Americans](#), most members of the Cherokee Nation will pass through tribal hospitals and outreach clinics. Because of this, Dr. Mera said, it is easier to screen nearly everyone for hepatitis C in this project.

Hepatitis C screening in this project differs slightly from the CDC [recommendation](#) that all Baby Boomers (anyone born between 1945 and 1965) should be screened for hepatitis C. In his work in the Cherokee Nation, Dr. Mera discovered that half of the hepatitis C patients in his community were younger than fifty years old.

He decided to change the narrative then and there.

“We’re doing age targeted screening,” Dr. Mera said in the PBS article. “We’re not doing screening based on risk factors because we know it doesn’t work well for us.”

Now, under the tribe’s hepatitis C elimination program, anyone over twenty years old who comes through the Cherokee health system (for any reason) is screened for hepatitis C.

As a result, the Cherokee program has screened and treated 300 with hepatitis C. Of those who have completed treatment and finished evaluation, 96% have achieved SVR, a functional cure for hepatitis C. What an accomplishment!

These stories remind us to keep the prospect of eliminating hepatitis C in the forefront of our minds. Through partnerships with health departments and community organizations, we can achieve widespread curative treatment access to those who need it most.

To keep up with their amazing work, be sure to follow Cherokee Nation on [Twitter](#) and head to the Cherokee Nation’s [website](#) to learn more about their work in the community!

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