The impotence of double-checking references

July 2, 2015 By Rick Nash

Hep C (HCV) has an interesting history in regards to the world wide web. HCV was ID'd in 1989, and the World Wide Web was created in 1989.

HCV as we know it is as old as the world wide web, and subsequently has the lots of accessible data cataloged online, updated online, and Its treatments have felt the benefit of that web-based connectivity.

A few weeks ago I noticed something off with the incarcerated numbers for HCV patients being higher than it actually is.

While doing research regarding Medicaid carve-out and carve-in policies,
 I came across something.

It repeated a high 31% HCV rate for incarcerated individuals i'd seen quoted by the CDC recently. So to determine its validity in 2013 I looked at the source material. It pointed to this reference; a 2011 paper regarding HCV prevalence in the USA.

The data that the Prevalence paper used was a study done in 1999-2000, but published in 2004.

Which is worrisome not only because the data is over 12 years old, but because the data spans 7 years to comprise the those statistics regarding prisoners. Which includes a more recent 2006 paper that uses more accurate methods of determining HCV infection. The older Bureau of Justice report in 1999-2000 uses only the antibody test which has a potential 10-25% chance of a false positive. Normally a span of 7 years isn't so ridiculous, but taking into consideration the increased efficacy of the testing procedures with new CDC guidelines which happened in 2003. This data is effectively two data sets. Which invalidates the derived data, as it does not take that aspect into account. (crazy thing is that HCV Antibody only was still the primary method of detection in 2011 for nearly half of data reported despite the improved accuracy of using the HCV RNA in addition.)

It's important to consider more than credibility when looking at sources. *The data was double-checked, and it passed muster, sometimes it takes more. It just means some of the data is impotent rather than important, because all it needed was to be framed properly to account for the difference of the testing procedures and the data would be more consistent.*

Just because it comes from a credible source could still mean some data within is no longer relevant.

The rest of the paper borrows statistics from more recent timelines. Environment at the time is important to consider.

Information and misinformation spread easily on the internet. HCV has felt both sides of that knowledge spread. Without looking deep into sources, and verifying their existing relevance it's hard to know what's right and wrong. Even the CDC makes mistakes, the important thing is that they're willing to double check them for accuracy and update them accordingly.

Like technology whose updates change from year to year, so does medical info about HCV. It's easy to miss some information and be up to date on the vast majority of it.

In the ever changing environment of HCV, it's important to welcome criticism. And to keep the open dialogue so it can adapt with new information

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That 31% has has a recent update in February 2015:

in 2011/12 roughly 16% of prisoners/people in jail reported having/had Hepatitis C.

Not 1 in 3 as the incarceration fact sheet explains.

Out of date and incorrect info, overall the fact sheet is due for an update.

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