



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

March 24, 2003

Patrick J. McConnon, M.P.H.
Executive Director
Council of State and Territorial Epidemiologists (CSTE)
2872 Woodcock Boulevard, Suite 303
Atlanta, Georgia 30341-4015

Dear Mr. ^{Pat}McConnon:

Thank you for your letter forwarding the position statement, adopted by the Council of State and Territorial Epidemiologists (CSTE), in 2002.

Enclosed is the Centers for Disease Control and Prevention's (CDC) response to the CSTE Position Statement entitled "Hepatitis C Virus Infection (past or present)" sent to the National Center for Infectious Disease.

CDC looks forward to continued collaboration with CSTE regarding public health issues of mutual concern.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jim", is written over the typed name.

James M. Hughes, M.D.
Director
National Center for Infectious Diseases

Enclosure

RECEIVED MAR 25 2003

CSTE POSITION STATEMENT: #02-ID-01

TITLE: Hepatitis C Virus Infection (past or present)

Statement of desired action(s) to be taken:

CSTE Recommends:

1. Approve case definition for hepatitis C virus infection.
2. Place confirmed cases of hepatitis C virus infection under national surveillance through the National Notifiable Diseases Surveillance System (NNDSS), with the clear understanding that individual states will implement this as resources become available.
3. Eliminate the case definition for Non-A, Non-B hepatitis and remove Non-A, Non-B hepatitis from the National Notifiable Diseases Surveillance System (NNDSS).
4. The Centers for Disease Control and Prevention (CDC) should assist states and territories in funding these efforts.

CDC Comments:

CDC supports the position statement 02-ID-01, entitled, "Hepatitis C virus infection (past or present)". This position statement proposes a surveillance case definition for hepatitis C virus (HCV) infection and endorses placing confirmed cases of HCV infection under national surveillance through NNDSS. CDC is in agreement with the proposed case definition and believes that national surveillance is critical as HCV infected persons should be notified about their infection, and counseled about ways to prevent transmission to others and about the importance of a medical evaluation. CDC is working with state and local health departments to assist in the development of models for HCV infection surveillance. CDC recognizes that the allotment of additional resources would benefit HCV infection surveillance and prevention initiatives. As additional resources become available, consideration will be given for these important activities.

CDC also supports eliminating the case definition for Non-A, Non-B hepatitis and removing this condition from the NNDSS. Now that hepatitis C testing is widely available, there is no need for the Non-A, Non-B case definition or for case reporting.



April 14, 2003

Patrick J. McConnon, MPH
Executive Director
Council of State and Territorial Epidemiologists
2872 Woodcock Boulevard
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Atlanta, GA 30341-4015

Dear Pat,

Thank you for your letter forwarding the position statement on Hepatitis C Virus Infection, adopted by the Council of State and Territorial Epidemiologists (CSTE). Enclosed are comments from the Epidemiology Program Office (EPO) in response to this position statement.

We look forward to continued collaboration with CSTE regarding public health issues of mutual concern.

Sincerely,

A handwritten signature in black ink, appearing to read "Steve", is located below the word "Sincerely,".

Stephen B. Thacker, M.D., M.Sc.
Assistant Surgeon General
Director
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Centers for Disease Control & Prevention
1600 Clifton Rd., NE
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Enclosure

RECEIVED APR 16 2003

CSTE Position Statement: #02-ID-01

Hepatitis C virus infection (past or present)

- a) Hepatitis C virus infection (past or present) was designated as “nationally notifiable,” effective January 1, 2003. The NETSS code 10106 has been assigned to Hepatitis C virus infection (past or present) and was included in the latest iteration of the NNDSS event code list that SSB distributed in Fall, 2002.
- b) The EPO case definitions web site has been updated to include the “Hepatitis C virus infection (past or present)” case definition as listed in the position statement (02-ID-01). In addition, effective January 1, 2003, we will update our web site to include “Hepatitis C virus infection (past or present)” in the 2003 table of nationally notifiable infectious diseases.
- c) Hepatitis Non-A, Non-B was removed from the table of nationally notifiable infectious diseases beginning January 1, 2003. We will not eliminate the hepatitis Non-A, Non-B case definition, as recommended in position statement 02-ID-01, because data users will need it for studies they plan based on historical finalized data for this condition. In consultation with NCID’s Hepatitis Branch, we have instead decided to insert a comment field within the 2000 acute viral hepatitis case definition on the EPO case definitions web site, indicating the hepatitis Non-A, Non-B case definition is considered non-notifiable beginning January 1, 2003. In addition, our event code list, that we plan to distribute this Fall, will indicate this condition was deleted from the list of nationally notifiable diseases in 2003.
- a) NCID’s Hepatitis Branch has recommended that hepatitis C virus infection (past or present) data be excluded in the weekly *MMWR* tables in 2003 and in the *MMWR* Annual Summary for 2003 so data quality can be assessed and a determination can be made about whether to begin printing these data in 2004 in the *MMWR*. When the data are presented in the *MMWR*, they will be reported under the category heading of “Hepatitis (Viral, Chronic).”
- d) The Hepatitis Branch has initially recommended that only laboratory confirmed hepatitis C virus infection (past or present) case data should be presented when NNDSS data are reported.