

## **Hepatitis Outreach Network (HONE): HBV and HCV Screening of Ethnic Urban Populations of New York City with Linkage to Care**

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We started a viral hepatitis outreach network (HONE) with linkage to care targeting foreign-born communities at risk for HBV & HCV, with community organizations and the NYC Department of Health and Mental Hygiene, Office of Viral Hepatitis Coordination. **Methods:** We offered at-risk communities facing barriers to health care access, and community providers informal hepatitis didactics in their native languages, then trained volunteers to consent participants. All participants completed questionnaires in their native languages, with demographic, clinical and family history, hepatitis risk factors, and contact information of their primary care physician (PCP). Data were entered into a secure web-based database. Participants were excluded if they lacked a phone number or were <18 years of age. Testing included HBsAg, anti-HBc, anti-HBs, HCV Ab and serum ALT. Results were interpreted by Mount Sinai hepatologists, and participants were contacted via phone by a study coordinator for follow up recommendations. PCP's were contacted to advise on further testing and possible treatment. Individuals who lacked insurance or a PCP were provided community resources for further testing and treatment. **Results:** 4 didactic sessions were followed by 6 screening events from May to December, 2009. 631 persons were screened, of which 603 (95.6%) consented to study. Of those screened, 99% were foreign-born, the majority from Korea (42.6%) and China (20.9%) and the rest from other Asian countries. Mean age was 51y (range 22-86) and 58.5% were men. Mean ALT was 27 U/L (range 7-924); mean BMI 24 (range 6-43). 54 subjects (9%) were HBsAg+, and 11 (1.8%) were HCV Ab. Of those HBsAg+, 29.6% were from Korea, 48.1% from China, 9.3% from Taiwan and the rest from elsewhere. Of the 11 who were HCV Ab+, 64% were Korean, and 18% Chinese. HBsAg+ subjects had a mean ALT 56 (95% CI [17, 95]) vs. a mean of 25 for HBsAg- subjects (95% CI [23,26]), ( $p=0.0001$ , on univariate analysis). 111 (18.4%) subjects had all HBV markers negative, indicating an opportunity to vaccinate. 31 (5.1%) were HBcAb+ alone. 73.6% were uninsured and 73.3% did not have a PCP. All participants were contacted with their results and given recommendations, including HBV vaccines and further testing and treatment if HBV+ or HCV+. **Conclusion:** Among participants screened in 2009 for HONE, the overall HBsAg prevalence was 9% in foreign-born Korean and Chinese communities in NYC, whereas HCV prevalence was 1.8%. This establishes the importance of ethnic urban screening programs that partner with public and community providers to ensure detection of disease and linkage to care.