

# 2020 National Viral Hepatitis Progress Report

The National Viral Hepatitis Progress Report provides information on ten data indicators, providing an objective way to assess progress toward achieving key viral hepatitis goals.

	Baseline 2017 data year	2018 Observed (Annual Target*)	2025 Goal 2023 data year	Status
<b>Hepatitis A</b>				
Reduce estimated <sup>†</sup> new hepatitis A virus infections by $\geq 40\%$	6,700	24,900 (6,250)	4,000	✗
<b>Hepatitis B</b>				
Reduce estimated <sup>†</sup> new hepatitis B virus infections by $\geq 20\%$	22,200	21,600 (21,500)	18,000	➔
Reduce reported rate <sup>‡</sup> of new hepatitis B virus infections among persons who inject drugs <sup>¶</sup> by $\geq 25\%$	1.4	1.2 (1.3)	1.0	✓
Reduce reported rate <sup>‡</sup> of hepatitis B-related deaths by $\geq 20\%$	0.46	0.43 (0.45)	0.37	✓
Reduce reported rate <sup>‡</sup> of hepatitis B-related deaths among Asian and Pacific Islanders by $\geq 25\%$	2.45	2.10 (2.35)	1.84	✓
<b>Hepatitis C</b>				
Reduce estimated <sup>†</sup> new hepatitis C virus infections by $\geq 20\%$	44,700	50,300 (43,083)	35,000	✗
Reduce reported rate <sup>‡</sup> of new hepatitis C virus infections among persons who inject drugs <sup>¶</sup> by $\geq 25\%$	2.3	2.6 (2.2)	1.7	✗
Reduce reported rate <sup>‡</sup> of hepatitis C-related deaths by $\geq 20\%$	4.13	3.72 (3.94)	3.00	✓
Reduce reported rate <sup>‡</sup> of hepatitis C-related deaths among American Indian and Alaska Native persons by $\geq 30\%$	10.24	9.05 (9.73)	7.17	✓
Reduce reported rate <sup>‡</sup> of hepatitis C-related deaths among non-Hispanic Black persons by $\geq 30\%$	7.03	6.31 (6.68)	4.92	✓
*Annual targets assume a constant (linear) rate of change from the observed baseline (2017) to the 2025 goal (2023 data year)				
†The number of estimated viral hepatitis infections was determined by multiplying the number of reported cases by a factor that adjusted for under-ascertainment and under-reporting (CDC 2018 Surveillance Summary and Klevens, et al, 2014).				
‡Per 100,000 population				
¶Persons aged 18–40 years serve as a proxy for persons who inject drugs				



Met or exceeded current annual Target



Moving **toward** annual target, but annual target was not fully met



Annual target was not met and has not changed or moved **away** from annual target

## Findings highlight the importance of

- Vaccinating vulnerable populations against hepatitis A and hepatitis B.
- Detecting and stopping ongoing transmission of hepatitis A, hepatitis B, and hepatitis C viruses.
- Improving testing and linkage to care and treatment for persons with chronic hepatitis B and hepatitis C.

## Progress towards these goals can be achieved by

- Continuing to promote hepatitis A and hepatitis B childhood vaccination schedules and vaccination of at-risk adults according to [Advisory Committee on Immunization Practices \(ACIP\) Vaccine Recommendations and Guidelines](#).
- Implementing comprehensive community-level programs for people who inject drugs (PWID) (e.g., access to syringe services programs, linkage to medication-assisted treatment programs, vaccination, testing, and treatment).
- Increasing the proportion of persons receiving recommended testing for [hepatitis B](#) and/or [hepatitis C](#).
- Increasing the proportion of persons with hepatitis B or hepatitis C who are referred for care and who receive appropriate treatment, particularly PWID, Asians and Pacific Islanders, American Indians and Alaska Natives, and non-Hispanic Blacks.
- Supporting research and development of a hepatitis C vaccine and new and more effective HBV anti-viral therapies with the goal of identifying a functional cure for hepatitis B.
- Fostering collaborations that increase hepatitis C drug affordability, cost savings for payers, and access for patients.