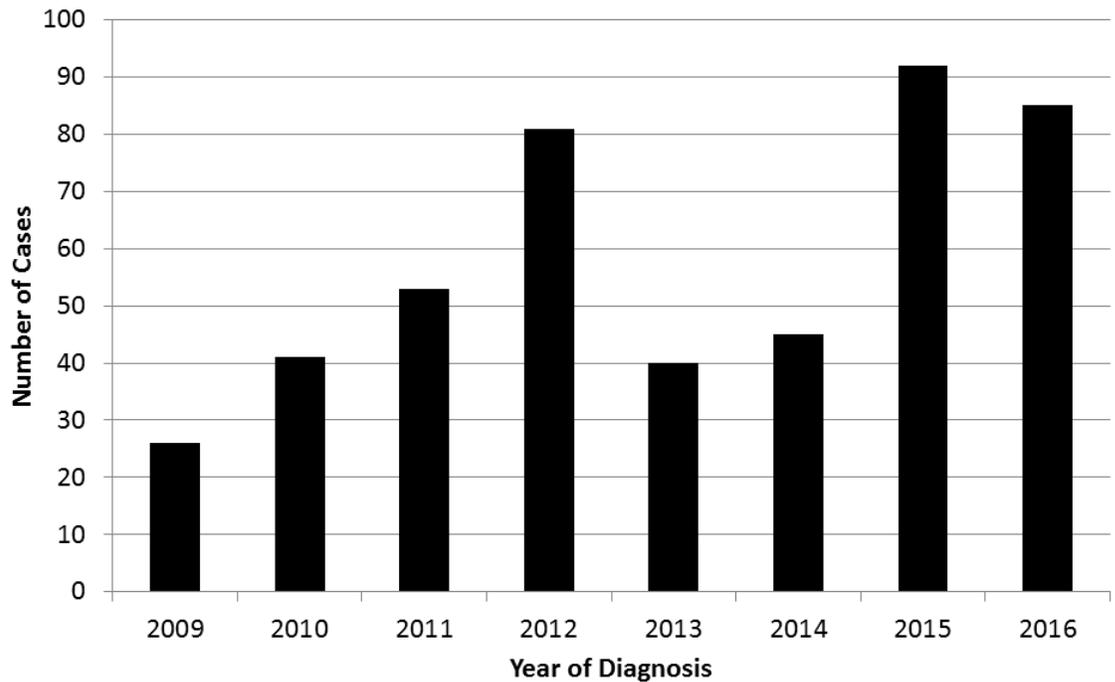


Quick Facts

2016 Acute Hepatitis C Cases in Oklahoma

Number of Acute Hepatitis C Cases, Oklahoma 2009-2016



OVERVIEW

Hepatitis C, caused by the hepatitis C virus (HCV), is a liver disease that is classified as either acute or chronic. Acute HCV is the short-term illness that occurs within the first 6 months after someone is infected; however, the infection can become chronic. Acute infection can be a mild illness with few or no symptoms or a serious condition requiring hospitalization.

In 2016, there were 85 cases reported and confirmed as acute HCV in the state of Oklahoma. Males accounted for 47.1% (40) of the cases and females accounted for 52.9% (45) of the cases. The rate of acute HCV in Oklahoma was 2.2 per 100,000 population, with the rate among females slightly higher (2.3 per 100,000) than males (2.1 per 100,000).

BY AGE

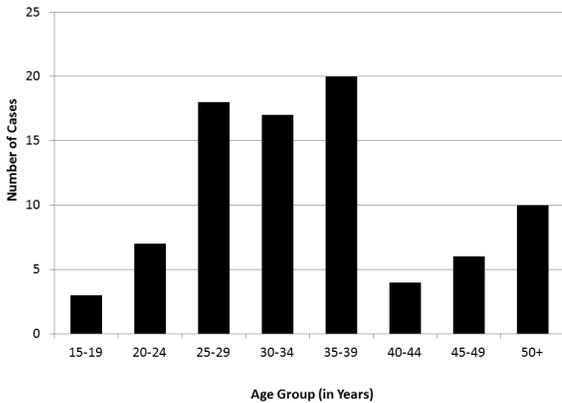
In 2016, more than half (64.7%) of the acute HCV patients were between 25 to 39 years old. Age group 35-39 years old accounted for the largest number and proportion of cases in 2016, with approximately one quarter of all cases (20 cases, 23.5%), followed by the 25 to 29 year age group at 21.2% (18 cases), the 30-34 year old group at 20.0% (17 cases), and the 50 years and over age group at 11.8% (10 cases).

The 35-39 years age group had the highest rate of acute HCV at 8.0 cases per 100,000 population, followed by the 25-29 years age group (6.5 per 100,000) and the 30-34 years age group (6.3 per 100,000).

For More Information Contact:

HIV/STD Service
 Division of Surveillance
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 1000 NE 10th Street
 Oklahoma City, OK 73117
 405.271.4636
hivstd.health.ok.gov

Acute Hepatitis C Cases by Age Group, Oklahoma 2016



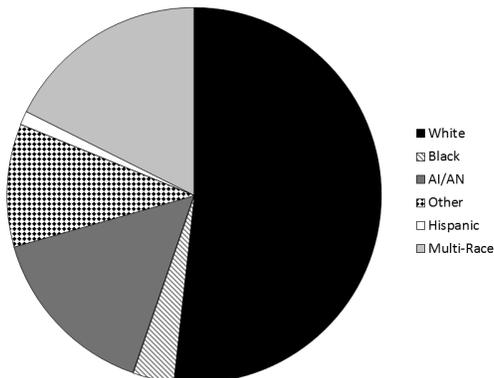
BY RACE/ETHNICITY

Of the 85 persons diagnosed with acute HCV in 2016:

- 51.8% (44) were White,
- 17.6% (15) were Multi Race,
- 15.3% (13) were American Indian or Alaska Native,
- 3.5% (3) were Black,
- 1.2% (1) were Hispanic, and
- 10.6% (9) were classified as other races.

Other races accounted for the highest rate of acute HCV at 9.9 per 100,000 population, which was 4.5 times higher than the state rate. This was followed by Multi Race at a rate of 6.9 per 100,000 (3.1 times the state rate) and American Indian/Alaska Native at 4.0 per 100,000 (1.8 times the state rate). There were no cases among Asian/ Pacific Islander.

Acute Hepatitis C Cases by Race/Ethnicity, Oklahoma 2016

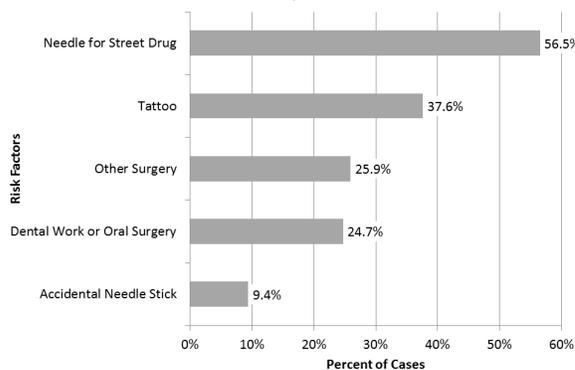


RISK FACTORS

HCV is usually spread when the blood of a person infected with HCV enters the body of someone who is not infected. Today, most people become infected with HCV by sharing needles, syringes, or any other equipment to inject drugs. While rare, sexual transmission of HCV is possible. HCV can also be spread when getting tattoos and body piercings in unlicensed facilities, informal settings, or with non-sterile instruments.

In Oklahoma, HCV risk factors are only gathered if a person participates in a patient interview. The percentages presented in this section were based on all 85 acute HCV cases in 2016. The risk factors are not mutually exclusive, and each patient could report more than one risk factor.

Percent of Hepatitis C Risk Factors Among Acute HCV Cases, Oklahoma 2016



In 2016, the majority (48, 56.5%) of acute HCV cases reported a history of using needles for street drugs, followed by more than one-third (32, 37.6%) reported having a tattoo. Below is a detailed list of risk factors reported by all acute patients:

- 56.5% (48) used needle for street drugs,
- 37.6% (32) had a tattoo,
- 25.9% (22) had a surgery,
- 24.7% (21) had dental work or oral surgery,
- 9.4% (8) had an accidental needle stick, and
- 4.7% (4) received blood or blood products.

More than half (64.7%) of the acute HCV cases were 25 to 39 years old.

The 35-39 years age group had the highest rate of acute HCV in 2016.

Cases with a race reported as 'Other' had a acute HCV case rate 4.5 times higher than the state rate.

The majority (48, 56.5%) of acute HCV cases reported a history of using needles for street drugs.