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**Northern California Cancer Center Researcher Collaborates on Hepatitis B Studies
Among Asian and Pacific Islander Americans**

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**Education and screening through culturally aligned interventions may hold the key
to lessening the burden of hepatitis B virus infection and liver cancer**

FREMONT, CA - *January 15, 2008* - A research scientist at the **Northern California Cancer Center** (www.nccc.org), a leading, independent, population-based research organization, has recently collaborated with colleagues at the **Asian Liver Center at Stanford University** on two papers that demonstrate the effectiveness of culturally aligned interventions that may help reduce the disproportionate burden of chronic HBV infection and liver cancer among Asian/Pacific Islander Americans.

“Our studies show that community-based organizations, health care professionals, researchers, and the general public can work together to increase awareness and prevention of chronic HBV infection and liver cancer in the Asian and Pacific Islander community,” explained **Ellen Chang, Sc.D.** of the Northern California Cancer Center. “HBV testing is the key: anyone who is chronically infected with HBV should be regularly screened for early liver cancer, while anyone who is unprotected can receive a vaccine that will protect them against HBV.”

Asian Americans are proportionally the fastest growing racial group in the US and the majority are immigrants from eastern or southeastern Asia – areas with a high prevalence of chronic hepatitis B virus (HBV) infection and, consequently, high incidence of liver cancer.

In these regions, the prevalence of chronic HBV infection is over 10%, compared with less than 0.5% in the US. As a result, the incidence of liver cancer among Asian/Pacific Islander Americans is over three times that of non-Hispanic White Americans.

“This work is vitally important because detection of this infection allows for routine liver cancer screening in the high-risk chronically infected population, as well as treatment using effective antiviral therapies to decrease the risk of progression to cirrhosis and liver cancer,” continued Chang. “Despite the major public health impact of liver disease, Asian/Pacific Islander American communities have low levels of awareness and knowledge regarding HBV and liver cancer. Poor HBV-related knowledge is a barrier to the prevention, diagnosis, and management of this chronic infection. And, because chronic HBV infection usually causes no symptoms, many people who are infected don’t even know they have it.”

The first paper, **“Building partnerships with traditional Chinese medicine practitioners to increase hepatitis B awareness and prevention”** (published in *The Journal of Alternative and Complementary Medicine*), details the results of the Annual Hepatitis B Prevention and Education Symposium, conducted for traditional Chinese medicine providers and acupuncturists in California. This culturally targeted intervention developed partnerships between non-western and western health care providers to prevent chronic HBV infection and death from liver cancer among Asians and Pacific Islanders. For four years, 2004 through 2007, the organizers partnered with professional, academic and community-based groups to organize the full-day educational symposium. Over 1,000 participants attended the four symposia combined; most were born in Asia, and the majority of their patients were also Asian/Pacific Islander Americans. The symposium activities included educational lectures and games, presentation of a physician’s guide to HBV management, and case studies. After attending the symposium the participants’ percentage of correct answers to knowledge-based questions about hepatitis B virus infection rose from below 60% to above 75%.

The second paper, **“The Jade Ribbon Campaign: A model program for community outreach and education to prevent liver cancer in Asian Americans”** (published in the *Journal of Immigrant and Minority Health*), describes a culturally targeted, community-based outreach program that provided free HBV screening and education to 476 Chinese Americans living in the San Francisco Bay Area. The results of the screening showed a 13% prevalence

of chronic HBV infection among the participants, whereas only 8% showed evidence of prior vaccination against the infection. Participants reported low preventive action against chronic HBV infection and liver cancer before the clinic, but after one year, 67% of those with chronic HBV infection had consulted a physician for liver screening, and 78% of all participants had encouraged family members to be tested for HBV. These results demonstrate that HBV screening, when supplemented with tailored recommendations for clinical follow-up, can lead patients to seek appropriate medical management of chronic HBV infection and screening for early detection of liver cancer.

Quick Facts about Hepatitis B virus infection:

Symptoms:

There are no symptoms of chronic HBV infection, so that's why people have to get tested. Essentially, every Asian/Pacific Islander American-- particular those **born** in Asia or the Pacific Islands, or those with parents born there-- should get tested.

The Vaccine:

The vaccine consists of three shots (0 months, 1-2 months, and 6 months). Getting vaccinated prevents future HBV infection.

Transmission:

HBV is transmitted through blood, not casual contact with infected individuals. The primary routes of HBV transmission are 1) from mother to newborn at birth, 2) sexual intercourse, 3) other contact with infected blood, e.g., through shared toothbrushes or razors, but NOT through contaminated food, contaminated water, kissing, or casual contact. The greatest risk of chronic infection is at birth and during infancy/childhood/early adulthood.

The Northern California Cancer Center recommends:

- 1) Get tested for HBV infection
- 2) If you are unprotected, get vaccinated against HBV
- 3) If you are chronically infected, visit a doctor to get screened for liver cancer
- 4) Tell your friends and family members about HBV and liver cancer, and encourage them to get tested for HBV
- 5) Ask your health care provider whether he or she tests all Asian/Pacific Islander patients, especially the foreign-born, for HBV

About the Northern California Cancer Center:

The Northern California Cancer Center (www.nccc.org) is a nationally recognized leader in understanding the causes and prevention of cancer and in improving the quality of life for individuals living with cancer. The organization has been working with scientists, educators, patients, clinicians, and community leaders since 1974. NCCC is a 501(c) 3 nonprofit with 170 employees and a \$15 million operating budget.