The United States is experiencing an opioid epidemic involving increases in unsterile injection practices. The Consolidated Appropriations Act, 2016 (Pub. L. 114-113) recently signed into law by President Obama, creates an opportunity to reduce opioid misuse and prevent new HIV and viral hepatitis infections. On April 25, 2016, CDC released its Program Guidance for Implementing Certain Components of Syringe Services Programs, 2016. This document follows the release of the Department of Health and Human Services Implementation Guidance to Support Certain Components of Syringe Services Programs, 2016, and provides guidance to state, tribal, local, and territorial health departments interested in implementing or expanding syringe services programs. Syringe service programs not only provide sterile injection equipment, but also frequently include other essential health services such as linkage to clinical care, substance use treatment, and social services; HIV, hepatitis, STD, and TB screening and prevention services; provision of naloxone to reverse opioid overdoses; and immunizations. CDC is committed to helping communities use effective tools to stop the spread of HIV, viral hepatitis, STDs, and TB.

Hepatitis C Awareness

More people die from hepatitis C than 60 other reported infectious diseases combined. For persons born during 1945-1965, hepatitis C is an urgent health issue, with 73% of hepatitis C-related deaths among this group. With the growing opioid epidemic, young people who inject drugs are creating a new wave of hepatitis C infections in America. Scaling up testing and treatment could diminish hepatitis C-related deaths and reduce new infections. In honor of May as Hepatitis Awareness Month and Hepatitis Testing Day on May 19, learn more about the different types of viral hepatitis, take the Hepatitis Risk Assessment, and learn what you can do to help increase testing for hepatitis B and hepatitis C in your community.

TB Surveillance

Preliminary TB surveillance data for the United States was recently released by CDC. In 2015, a total of 9,563 TB cases were reported. This represents an increase of 157 cases from the 9,406 cases reported in 2014. TB rates in the United States remained approximately 3.0 cases per 100,000 persons during 2013-2015. These data may indicate the limitations of what can be achieved using current methods and resources.

Eliminating TB in the United States will require increased efforts to test and treat latent TB infection among high-risk groups. Persons with latent TB infection are infected with M. tuberculosis, but have no signs of illness. However, without treatment, they are at risk for progressing to TB disease. More than 85% of U.S. TB cases are now believed to be associated with longstanding untreated latent TB infection. The cycle of TB transmission can be ended by early diagnosis, isolation, and treatment of patients with TB disease, examining contacts, and treating patients with latent TB infection. Official TB case counts will be available later in the year, as part of CDC’s 2015 TB surveillance report.