DISEASE INTEGRATION: SURVEILLANCE TO PRACTICE

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Program Collaboration and Services Integration (PCSI)

“A Holistic approach to blend and organize inter-related services”

- Kevin Fenton, MD, PhD

Syndemics

- Two or more diseases that overlap and interact in a population
- Co-infection leads to more serious outcomes in individuals and populations

Syndemics

- HIV, viral hepatitis and STDs share common risks and modes of transmission;
- STDs increase the risk for HIV infection;
- HIV is the greatest risk factor for progression to TB disease;
- TB is the most common AIDS-defining opportunistic condition; and
- Clinical course and outcomes are influenced by concurrent disease.
The 1st integrated surveillance system in the U.S.

NC EDSS

HIV Cascade: Diagnosed 2007- and living through 2011

Estimated HIV-infected Cases diagnosed & reported
At least 1 care visit
2 or more care visits 3 months apart
Viral Suppressed

30%

Surveillance and Prevention:
STDMIS
TB
eHARS

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Diagnosed 2007- and living through 2011

Estimated HIV-infected Cases diagnosed & reported
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2 or more care visits 3 months apart
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30%
HIV Cascade: Diagnosed 2007- and living through 2011

Survey and Service Delivery:
- STDs
- Syphilis
- TB
- Hepatitis

Estimated HIV-infected Cases diagnosed & reported
- at least 1 care visit
- at least 2 or more care visits, 3 or more visits
- Viral suppression

Disease Overlap: San Francisco

- 13% of PLWHA co-infected
- 61% Syphilis cases co-infected
- 20-40% STD cases co-infected
- 5% Hepatitis B cases co-infected
- 14% Hepatitis C cases co-infected
- 6% Active TB cases co-infected
- 2% LTBI cases co-infected

Table: Rates* of co-infections among reported cases, North Carolina, 2011

*per 1,000 reported cases.
Next Steps and Goals

- Evaluate lessons learned from PCSI project
- Identify barriers
- Implement best practices statewide where appropriate and applicable

- Create a framework for levels of services integration
  - Preventing disease among most at risk
  - Ensuring access to culturally appropriate care
  - Interrupting disease transmission and co-morbidity

NC PCSI Best Practices

- Use the epidemiological data to guide your activities
- Inform staff & build support
- Create support within the community to support collaboration and potential sharing of resources
- Be Flexible
- Think outside the box (be creative)
- Create a method to track outcomes