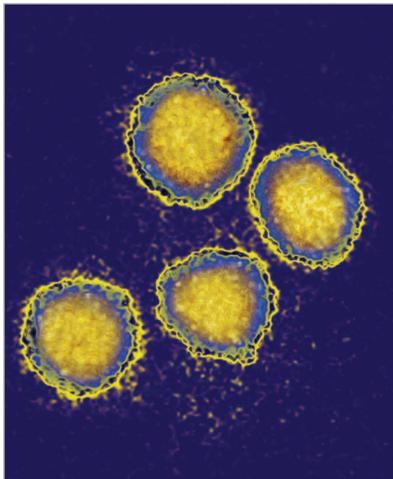


# News From the Centers for Disease Control and Prevention

## Challenges in HCV Elimination

Early progress in a hepatitis C virus (HCV) elimination program launched 2 years ago in the Eurasian country of Georgia apparently has slowed, leading health officials to focus on improvements in screening and linkage to care.



The Georgia HCV Elimination Program, launched in 2015 with the CDC's assistance, was the world's first such countrywide initiative. Its elimination goal was defined as a 90% reduction in HCV prevalence by 2020. The program began with 4 treatment centers, all located in the capital city Tbilisi. By December 2016, 27 centers were operating throughout the country.

From January 2015 to December 2016, nearly 473 000 HCV screening tests were administered. About 11% of patients tested positive and approximately 30 000 were diagnosed with chronic HCV infection. Nearly 20 000 completed treatment; about 5400 were cured.

By the second half of 2016, the average number of people starting treatment each month increased by nearly 300% compared with the previous year. The number initiating treatment peaked at nearly 5000 in September 2016. The following month, however, the numbers began to fall.

Targeted screening programs—at settings such as harm-reduction facilities and prisons that yield a high proportion of positive results—and easier access to treatment

are needed if Georgia is to meet its 2020 HCV elimination goal, the authors noted. "Lessons learned from this program can inform similar initiatives in other countries and help curb the global epidemic of viral hepatitis," they wrote.

## Lax Infection Control Consequences

Serious disregard for infection control practices at a New Jersey outpatient clinic left dozens of patients with septic arthritis, many who required surgery to drain infected joints. Two staff physicians and 2 medical assistants had treated the patients for osteoarthritic knee pain with intra-articular injections of a glucocorticoid or a hyaluronic acid-based product.

Earlier this year the New Jersey Department of Health identified 41 cases of septic arthritis among 250 patients treated at the clinic during the first week of March. Cultures of their synovial fluid or knee tissue revealed the presence of at least 12 types of bacteria. The organisms included *Streptococcus mitis*, *Streptococcus oralis*, *Abiotrophia defectiva*, *Staphylococcus aureus*, *Actinomyces odontolyticus*, and others that commonly are found in oral flora.

During an unannounced inspection in mid-March, after the clinic closed voluntarily because so many patients had reported severe knee pain and swelling, state and local inves-

tigators found multiple breaches in infection prevention recommendations. Staff members didn't know that single-use medications are to be used for only 1 patient or that multiple-dose containers must be accessed under pharmacy conditions with a laminar flow hood, appropriate garbing, staff training, and environmental monitoring.

The investigators found that the staff used a 50-mL container of contrast material up to 50 times, without pharmacy conditions in place, after cleaning it with alcohol only before the initial draw. Medical assistants had drawn medication into syringes up to 4 days before procedures were performed, contrary to recommendations that syringes filled from single-dose vials be prepared only 1 hour in advance.

A clinic physician who demonstrated for investigators how procedures were performed didn't wear a face mask and wore nonsterile gloves during procedures.

Although additional septic arthritis cases weren't reported after the clinic implemented infection prevention practices, the study authors said the episode highlights the need for vigilance in following infection control standards among outpatient settings.

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