

Knowledge is power
Q&A with Dr. Jon
McCone Jr.

We are united
Patient resources
across the country

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**MEDIA
PLANET**

September 2012

HEPATITIS & LIVER HEALTH

**GET
TESTED
TODAY!**

LISTEN UP!

Musicians advocating for
hepatitis awareness:



NATALIE COLE

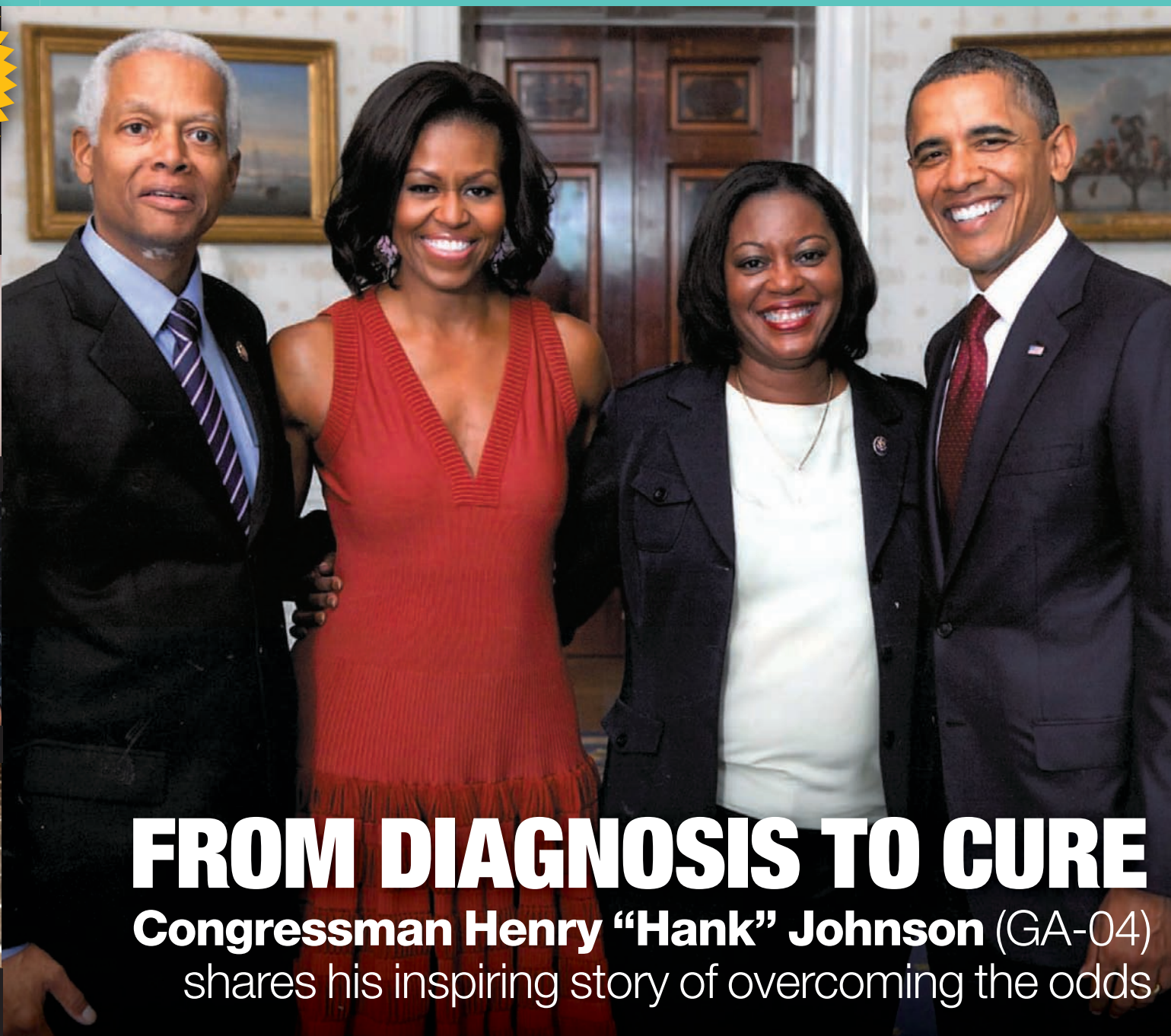


JON SECADA



GREGG ALLMAN

PHOTOS ABOVE: TUNE IN TO HEP C
PHOTO RIGHT: SPECIAL FROM CONGRESSMAN
JOHNSON'S OFFICE



FROM DIAGNOSIS TO CURE

Congressman Henry "Hank" Johnson (GA-04)
shares his inspiring story of overcoming the odds

CDC recommends **all** Baby Boomers
get a **one-time Hepatitis C Test**

If you were born between 1945 and 1965, ask your healthcare provider
today for an OraQuick® HCV test.

HEP C | TEST IT.
FIND IT.
FIGHT IT.
www.TestHepC.com

OraQuick® Rapid
Antibody
HCV Test



20 minutes to know
if you may have
Hep C



Not actual patients.

VICTRELIS® (boceprevir) 200 mg Capsules is a prescription medicine used with the medicines peginterferon alfa and ribavirin (peg/riba) to treat long-lasting (chronic) hepatitis C genotype 1 infection in adults with stable (compensated) liver disease who have not been treated before or who have failed previous treatment. **Do not take VICTRELIS alone.**

It is not known if VICTRELIS is safe and effective in children under 18 years of age.

Important Safety Information

VICTRELIS plus peg/riba may cause birth defects or death of your unborn baby. If you are pregnant or your sexual partner is pregnant or plans to become pregnant, do not take these medicines. You or your sexual partner should not become pregnant while taking VICTRELIS plus peg/riba and within 6 months after treatment is over.

- Females and males must use 2 forms of birth control during treatment and for 6 months after treatment with VICTRELIS plus peg/riba. Hormonal forms of birth control, such as birth control pills, vaginal rings, implants and injections, may not work as well during treatment with VICTRELIS and you may become pregnant.
- Females must have a pregnancy test before starting treatment with VICTRELIS plus peg/riba, every month while being treated, and every month for 6 months after all treatment is over. If you or your female sexual partner becomes pregnant during this time, tell your health care provider right away.

Do not take VICTRELIS if you take certain medicines. VICTRELIS and other medicines may affect each other. This can cause you to have too much or not enough VICTRELIS or your other medicines in your body, affecting the way VICTRELIS and your other medicines work, or causing side effects that can be serious or life threatening.

Tell your health care provider about all the medicines that you take, including prescription and non-prescription medicines, vitamins, and herbal supplements. Do not start taking a new medicine without telling your health care provider. For a listing of medicines that you should not take with VICTRELIS, please see the Medication Guide on the back of the next page.

Why do you want a greater chance to be cured of the hepatitis C virus?

“FOR THE LOVE OF MY FAMILY”

There’s promising news for adults with genotype 1 who have not been treated for chronic hep C before.

Combination therapy with VICTRELIS® (boceprevir) offers a greater chance of cure for some patients versus treatment with peginterferon alfa and ribavirin (peg/riba) alone. “Cure” means you have cleared the hep C virus (it is not detectable in your blood 6 months after completing all treatment).

- In clinical studies with patients who have not been treated before, 63% to 66% cleared the virus when VICTRELIS was added to peg/riba versus 38% with peg/riba alone.

The time is now.
Talk to your doctor today.

Important Safety Information (continued)

Before you take VICTRELIS, tell your health care provider if you have blood problems like low red blood cell count (anemia) or a certain type of low white blood cell count (neutropenia), have liver problems other than hepatitis C, have human immunodeficiency virus (HIV) or any other immunity problems, had an organ transplant, plan to have surgery, have any other medical condition, or are breastfeeding. It is not known if VICTRELIS passes into breast milk. You and your health care provider should decide if you will take VICTRELIS or breastfeed. You should not do both.

VICTRELIS may cause serious side effects, including blood problems. VICTRELIS can affect your bone marrow and cause low red blood cell and low white blood cell counts. In some people, these blood cell counts may fall to dangerously low levels. If your blood cell counts become very low, you can get anemia or infections.

Before and during treatment, your health care provider will do blood tests. These tests will check for side effects and also tell you early on how well treatment is working and how long you may need to be on it.

The most common side effects of VICTRELIS with combination therapy include: tiredness, nausea, headache, and change in taste. Tell your health care provider about any side effect that bothers you or that does not go away. There may be other side effects of VICTRELIS. For more information, ask your health care provider.

Call your health care provider for medical advice about side effects. You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

For more information on VICTRELIS, please see the Medication Guide on the next page.

Need help paying for VICTRELIS? Call 1-866-363-6379



Visit victrelis.com

MEDICATION GUIDE
VICTRELIS® (vic-TREL-is) (boceprevir) Capsules

Read this Medication Guide before you start taking VICTRELIS and each time you get a refill. There may be new information. This information does not take the place of talking with your healthcare provider about your medical condition or treatment. VICTRELIS is taken along with peginterferon alfa and ribavirin. You should also read those Medication Guides.

What is the most important information I should know about VICTRELIS?

VICTRELIS, in combination with peginterferon alfa and ribavirin, may cause birth defects or death of your unborn baby. If you are pregnant or your sexual partner is pregnant or plans to become pregnant, do not take these medicines. You or your sexual partner should not become pregnant while taking VICTRELIS, peginterferon alfa, and ribavirin combination therapy and for 6 months after treatment is over.

- Females and males must use 2 forms of birth control during treatment and for 6 months after treatment with VICTRELIS, peginterferon alfa, and ribavirin. Hormonal forms of birth control, such as birth control pills, vaginal rings, implants and injections, may not work as well during treatment with VICTRELIS. You may get pregnant while using these birth control methods while on VICTRELIS. Talk to your healthcare provider about other forms of birth control that may be used during this time.
- Females must have a pregnancy test before starting treatment with VICTRELIS combination therapy, every month while being treated, and every month for 6 months after treatment with VICTRELIS, peginterferon alfa, and ribavirin is over.
- If you or your female sexual partner becomes pregnant while taking VICTRELIS, peginterferon alfa, and ribavirin or within 6 months after you stop taking these medicines, tell your healthcare provider right away. You or your healthcare provider should contact the Ribavirin Pregnancy Registry by calling 1-800-593-2214. The Ribavirin Pregnancy Registry collects information about what happens to mothers and their babies if the mother takes ribavirin while she is pregnant.
- Do not take VICTRELIS alone to treat chronic hepatitis C infection. VICTRELIS must be used with peginterferon alfa and ribavirin to treat chronic hepatitis C infection.

What is VICTRELIS?

VICTRELIS is a prescription medicine used with the medicines peginterferon alfa and ribavirin to treat long-lasting (chronic) hepatitis C genotype 1 infection in adults with stable (compensated) liver disease who have not been treated before or who have failed previous treatment.

It is not known if VICTRELIS is safe and effective in children under 18 years of age.

Who should not take VICTRELIS?

See “What is the most important information I should know about VICTRELIS?”

Do not take VICTRELIS if you:

- take certain medicines. VICTRELIS may cause serious side effects when taken with certain medicines. Read the section “What should I tell my healthcare provider before taking VICTRELIS?”

Talk to your healthcare provider before taking VICTRELIS if you have any of the conditions listed below.

What should I tell my healthcare provider before taking VICTRELIS?

Before you take VICTRELIS, tell your healthcare provider if you:

- have certain blood disorders such as low red blood cell count (anemia) or a certain type of low white blood cell count (neutropenia)
- have liver problems other than hepatitis C infection
- have human immunodeficiency virus (HIV) or any other immunity problems
- have had an organ transplant
- plan to have surgery
- have any other medical condition
- are breastfeeding. It is not known if VICTRELIS passes into breast milk. You and your healthcare provider should decide if you will take VICTRELIS or breastfeed. You should not do both.

Tell your healthcare provider about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements.

VICTRELIS and other medicines may affect each other. This can cause you to have too much or not enough VICTRELIS or your other medicines in your body, affecting the way VICTRELIS and your other medicines work, or causing side effects than can be serious or life-threatening. Do not start taking a new medicine without telling your healthcare provider or pharmacist.

Do not take VICTRELIS if you take:

- alfuzosin hydrochloride (UROXATRAL®)
- anti-seizure medicines:
 - carbamazepine (CARBATROL®, EPITOL®, EQUETRO®, TEGRETOL®, TEGRETOL® XR, TERIL™)
 - phenobarbital
 - phenytoin (DILANTIN®)
- cisapride (PROPULSID®)
- drospirenone-containing medicines, including:
 - YAZ®, YASMIN®, ZARAH®, OCELLA®, GIANVI®, BEYAZ®, ANGELIQ®, LORYNA®, SYEDA™, SAFYRAL™
- ergot-containing medicines, including:
 - dihydroergotamine mesylate (D.H.E. 45®, MIGRANAL®)
 - ergonovine and methylergonovine (ERGOTRATE®, METHERGINE®)

- ergotamine tartrate (CAFERGOT®, MIGERGOT®, ERGOMAR®, ERGOSTAT, MEDIHALER ERGOTAMINE, WIGRAINE, WIGRETTES)
- lovastatin (ADVICOR®, ALTOPREV®, MEVACOR®)
- midazolam, when taken by mouth
- pimozide (ORAP®)
- rifampin (RIFADIN®, RIFAMATE®, RIFATER®, RIMACTANE)
- sildenafil (REVATIO®), when used for treating lung problems
- simvastatin (SIMCOR®, VYTORIN®, JUVISYNC™, ZOCOR®)
- St. John’s Wort (Hypericum perforatum) or products containing St. John’s Wort
- tadalafil (ADICRA®), when used for treating lung problems
- triazolam (HALCION®)

Tell your healthcare provider if you are taking or starting to take any of these medicines:

- atazanavir (REYATAZ®)
- clarithromycin (BIAXIN®, BIAXIN® XL, PREVPAC®)
- darunavir (PREZISTA®)
- dexamethasone
- efavirenz (SUSTIVA®, ATRIPLA®)
- itraconazole (ONMEL™, SPORANOX®)
- ketoconazole (NIZORAL®)
- lopinavir (KALETRA®)
- posaconazole (NOXAFIL®)
- rifabutin (MYCOBUTIN®)
- ritonavir (NORVIR®, KALETRA®)
- voriconazole (VFEND®)

Your healthcare provider may need to monitor your therapy more closely if you take VICTRELIS with the following medicines. Talk to your doctor if you are taking or starting to take these medicines:

- alprazolam (XANAX®)
- amiodarone (CORDARONE®, NEXTERONE®, PACERONE®)
- atorvastatin (LIPITOR®)
- bepidril (VASCOR)
- bosentan (TRACLEER®)
- budesonide (PULMICORT®, PULMICORT FLEXIHALER®, RHINOCORT®, PULMICORT RESPULES®, SYMBICORT®)
- buprenorphine (BUTRANS®, BUPRENEX®, SUBOXONE®, SUBUTEX®)
- cyclosporine (GENGRAF®, NEORAL®, SANDIMMUNE®)
- desipramine (NORPRAMIN®)
- digoxin (LANOXIN®)
- escitalopram (LEXAPRO®)
- felodipine (PLENDIL®)
- fluticasone (VERAMYST®, FLOVENT® HFA, FLOVENT® DISKUS, ADVAIR® HFA, ADVAIR DISKUS®)
- hormonal forms of birth control, including birth control pills, vaginal rings, implants and injections
- methadone (METHADOSE®, DOLOPHINE®)
- nifedipine (PROCARDIA®, ADALAT® CC, PROCARDIA XL®, AFEDITAB® CR)
- nicanidipine (CARDENE® SR, CARDENE®)
- pravastatin (PRAVACHOL®)
- propafenone (RHYTHMOL, RHYTHMOL SR®)
- quinidine
- salmeterol (ADVAIR® HFA, ADVAIR DISKUS®, SEREVENT®)
- sirolimus (RAPAMUNE®)
- tacrolimus (PROGRAF®)
- colchicine (COLCRYS®, Probenecid and Colchicine, COL-Probenecid)
- trazodone (OLEPTRO®)
- vardenafil (STAXYN®, LEVITRA®)
- warfarin (COUMADIN®, JANTOVEN®)

Know the medicines you take. Keep a list of them to show your healthcare provider and pharmacist when you get a new medicine.

How should I take VICTRELIS?

- Take VICTRELIS exactly as your healthcare provider tells you to take it.
- Your healthcare provider will tell you how much to take and when to take it.
- Take VICTRELIS with food (a meal or light snack).
- VICTRELIS is packaged into single daily-use bottles. Each bottle has your entire day’s worth of medicine. Make sure you are taking the correct amount of medicine each time.
- If you miss a dose of VICTRELIS and it is less than 2 hours before the next dose, the missed dose should be skipped.
- If you miss a dose of VICTRELIS and it is 2 or more hours before the next dose, take the missed dose with food. Take your next dose at your normal time and continue the normal dosing schedule.
- Do not double the next dose. If you have questions about what to do, call your healthcare provider.
- Your healthcare provider should do blood tests before you start treatment, at weeks 4, 8, 12, and 24, and at other times as needed during treatment, to see how well the medicines are working and to check for side effects.
- If you take too much VICTRELIS, call your healthcare provider or go to the nearest hospital emergency room right away.

What are the possible side effects of VICTRELIS?

VICTRELIS may cause serious side effects, including:

See “What is the most important information I should know about VICTRELIS?”

Blood problems. VICTRELIS can affect your bone marrow and cause low red blood cell, and low white blood cell, counts. In some people, these blood counts may fall to dangerously low levels. If your blood cell counts become very low, you can get anemia or infections.

The most common side effects of VICTRELIS in combination with peginterferon alfa and ribavirin include:

- tiredness
- nausea
- headache
- change in taste

Tell your healthcare provider about any side effect that bothers you or that does not go away.

These are not all the possible side effects of VICTRELIS. For more information, ask your healthcare provider or pharmacist.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How should I store VICTRELIS?

- Store VICTRELIS capsules in a refrigerator at 36 to 46°F (2 to 8°C). Safely throw away refrigerated VICTRELIS after the expiration date.
- VICTRELIS capsules may also be stored at room temperature up to 77°F (25°C) for 3 months.
- Keep VICTRELIS in a tightly closed container and away from heat.

Keep VICTRELIS and all medicines out of the reach of children.

General information about the safe and effective use of VICTRELIS.

It is not known if treatment with VICTRELIS will prevent you from infecting another person with the hepatitis C virus during your treatment. Talk with your healthcare provider about ways to prevent spreading the hepatitis C virus.

Medicines are sometimes prescribed for purposes other than those listed in a Medication Guide.

Do not use VICTRELIS for a condition for which it was not prescribed. Do not give VICTRELIS to other people, even if they have the same symptoms that you have. It may harm them.

This Medication Guide summarizes the most important information about VICTRELIS. If you would like more information, talk with your healthcare provider. You can ask your pharmacist or healthcare provider for information about VICTRELIS that is written for health professionals.

For more information, go to www.victrelis.com or call 1-877-888-4231.

What are the ingredients in VICTRELIS?

Active ingredients: boceprevir
Inactive ingredients: sodium lauryl sulfate, microcrystalline cellulose, lactose monohydrate, croscarmellose sodium, pre-gelatinized starch, and magnesium stearate.
Red capsule shell: gelatin, titanium dioxide, D&C Yellow #10, FD&C Blue #1, FD&C Red #40.
Yellow capsule shell: gelatin, titanium dioxide, D&C Yellow #10, FD&C Red #40, FD&C Yellow #6.
Red printing ink: shellac, red iron oxide.
Yellow printing ink: shellac, titanium dioxide, povidone, D&C Yellow #10 Aluminum Lake.

This Medication Guide has been approved by the U.S. Food and Drug Administration.




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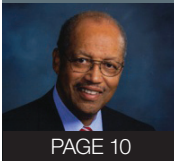
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CHALLENGES



WE RECOMMEND



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Q&A with Jon McCone Jr. MD, FACG, AGAF

“...get a HCV antibody test. IT CAN BE CURED.”



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Publisher: Steve Trifon steve.trifon@mediaplanet.com
Business Developer: Ian Silbert ian.silbert@mediaplanet.com
Designer: Kate Benjamin
Managing Director: Luciana Colapinto luciana.colapinto@mediaplanet.com
Editorial Manager: Sara Quigley sara.quigley@mediaplanet.com

Contributors: Petra Canan, Donna Cryer, Nicole Gray, Henry “Hank” Johnson, Jonathan McCone, Jr., Martha Saly

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RESOURCES AND PATIENT SUPPORT GROUPS

Hepatitis C Association

Provides information for patients, clinicians, and caregivers, as well as emotional support.
Call 1-877-437-4377

Hepatitis Education Project

HBV and HCV testing /HBV vaccination for underserved populations in the Seattle/Tacoma, WA areas. Call: 1-800-218-6932

The Hepatitis C Support Project

<http://www.hcvadvocate.org>;
<http://hbvadvocate.org>

Viral hepatitis claims the lives of **12,000 to 15,000** Americans each year.

IT IS TIME TO SPEAK UP

Chronic hepatitis B virus (HBV) and chronic hepatitis C virus (HCV), referred to together as viral hepatitis, are called “silent killers” because they can be asymptomatic for years while slowly causing severe liver damage. Silent too, because viral hepatitis remains virtually unknown to the general public, at-risk populations, and even healthcare providers lack critical knowledge about these infections. Complacency and inaction by policy makers contributes to the silence.

able, yet, tragically there are still 800 to 1,000 new cases of perinatally acquired HBV in the U.S. each year, due to missed vaccination of newborns. Moreover, HCV is largely curable, but rates of diagnosis and treatment remain low. The CDC recently recommended that all baby boomers be tested for the virus. This recommendation is significant and long awaited, but the recommendation will go nowhere without infrastructure to support the identification and care for people with HCV.

The societal impact is far-reaching. Chronic viral hepatitis is the primary cause of liver cancer, resulting in the loss of lives and the destruction of families. More than 150,000 Americans will die from liver cancer or end-stage liver disease in the next decade. Viral hepatitis remains the leading cause of liver transplantations in the U.S. The cost of medical care and hospitalization for end stage liver disease, liver transplant, and liver cancer far outweighs the cost of identifying those who are at risk.

The challenges we face

Ironically, many of the challenges related to hepatitis are not due to a lack of science, but to the lack of infrastructure to support the science. Because our health

care system does a poor job of viral hepatitis screening and testing, the majority of infected Americans remain undiagnosed until advanced liver damage has developed. Without knowledge of status, an individual cannot

“Without knowledge of status, an individual cannot receive timely treatment or make life changes.”



Martha Saly,
DIRECTOR, NVHR

receive timely treatment or make life changes—such as cessation of alcohol, a healthy diet, and regular exercise— to stem the transmission and progression of liver disease and prolong a high quality of life.

Looking to the future

The need to invest resources to overcome these barriers is pressing. We can’t afford to remain indifferent to the suffering and death associated with chronic viral hepatitis, nor will we be able to bear the future cost. Our leaders must support increased diagnosis and improved systems of care for persons with viral hepatitis. Solid science supports the need to act. Identifying the millions of Americans who do not know that they have viral hepatitis is not only the moral thing to do; it is the fiscally responsible approach to this burgeoning epidemic. Rather than cutting lives short, many at the peak of their productivity, and robbing families of their loved ones, we need to act before it is too late.

The Hepatitis B Foundation/Association of Asian Pacific Community Health Organizations (AAPCHO)

<http://www.hepbunited.org> a national campaign to address the public health challenge of hepatitis B among Asian Americans.

MARTHA SALY

editorial@mediaplanet.com

NEWS

✱ DON'T MISS

Social status: online tools seek increased liver donations

Obesity rates challenge supplies

Today, more than 16,000 patients wait for liver transplants, most suffering from hepatitis C and fatty liver disease, a build-up of triglyceride fat in liver cells. With half of nation's donation centers now capping donors' body mass index at 35, improving donor health seems daunting. Instead, groups are focusing on broadening the donation call, with many efforts going online.

A friend in the cause

Earlier this year, organ donation found an ally in Facebook when the site offered users the ability to display their organ donor status as part of timeline's Health and Wellness section. The tool also links users to their state's official organ-donation site, so users can complete legal registries if they haven't already done so. Less than four months into the program, 260,000 users signaled their commitment.

Facebook Director of Policy Communications Sarah Feinberg points out that beyond the number of listed donors, word spreads exponentially as endorsements and confirmations of a donor's desires. "The average Facebook user has 120 friends. So every time they are sharing that information with a huge group of that 120," said Feinberg.

"We're so excited to see things like the Facebook campaign reaching out and creating opportunities," Donna Cryer, President and CEO of the American Liver Foundation, said. "I think the most important step of that is making sure friends and family who'd be actually making the real decision to donate on their behalf know about the desire to donate."

WENDY TAYLOR

editorial@mediaplanet.com

MITIGATING THE RISK

The American Liver Foundation is often asked, "Who gets liver disease?" and the answer surprises people. Liver disease strikes people of every age, gender, race and socio-economic group. Babies are born with life-threatening liver conditions and often need surgery or a transplant within the first few months of their lives. Baby boomers are the group most likely to have contracted the hepatitis C virus. Anyone with an obesity problem has a higher than average risk of having fatty liver disease.

My connection to liver disease started as a 13 year old patient. Due to several auto-immune conditions, by the time I reached by early 20s I needed a liver transplant. I am one of the fortunate ones who received a transplant and consider myself blessed to be an 18 year transplant survivor, in addition to being a daughter, sister, wife, friend, lawyer, and

healthcare consultant.

I now have the privilege of transforming my personal patient experience into professional patient advocacy as the President and CEO of the American Liver Foundation. The Foundation serves patients and families facing all types of liver disease and with the most recent advances in treatments for hepatitis C, we have added extra support and resources for those at risk and those already diagnosed with hepatitis C.

The statistics surrounding hepatitis C in the United States are staggering: one in 33 baby boomers (those born between 1945 and 1965) are at risk to have the disease and of those 75 percent are not aware they have the virus. This is such a looming public health crisis the Centers for Disease Control recently made a recommendation that all baby boomers receive a one-time test for hepatitis C.

And if you are not a baby



Donna Cryer
President and CEO,
American Liver Foundation

boomer, what are the other risk factors? The list is short but important:

- Worked in a place where you came in contact with infected blood or needles, for example, health care workers
- Received a blood transfusion or organ transplant before July 1992
- Received a blood product

for clotting problems made before 1987

- Needed to have your blood filtered by a machine (hemodialysis) for a long period of time because your kidneys weren't working
- Were born to a mother with hepatitis C (HCV)
- Had unprotected sex with multiple partners
- Have or had a sexually transmitted disease
- Shared needles to inject drugs or straws to inhale them
- Had tattoos or body piercings in an unclean environment using unsterile equipment
- Have HIV

The American Liver Foundation has a hepatitis C Helpline Specialist (1800-GO-LIVER) and a newly formed virtual hepatitis C support group. No one needs to make the journey through liver disease alone.

DONNA CRYER

editorial@mediaplanet.com

BABY BOOMERS: Know your status, get tested

On August 16, 2012, the CDC issued new hepatitis C (HCV) testing guidelines that could help identify more than 800,000 cases of HCV in people born between 1945 and 1965. More than 2 million people in this target birth cohort---"the baby boomers"---are HCV infected, and 75 percent don't know it. People in this target birth cohort are five times more likely to be infected than other adults. And because HCV is asymptomatic until the liver starts to show signs of damage, more than 15,000 people in this group die each year of cirrhosis or liver cancer simply because they were not tested. Had they been tested, they could have been treated or made lifestyle changes to greatly improve their long-term outcomes.

There is a big push underway to increase viral hepatitis testing. An important boon to this effort has been more widespread use of the OraQuick HCV Rapid Anti-

body Test, an FDA-approved, point-of-care test. According to Colleen Flanigan, RN, Viral Hepatitis Coordinator, New York State Department of Health, "This is a good test. We are using it as part of a statewide program. It only requires a finger prick and you don't need an onsite lab to get results. For patients, it's less invasive. You can get tested and have the results within 20 minutes. Rapid testing allows people to get screened, and if necessary, get referred to linkage of care."

It is important to note that the OraQuick test is antibody based. That means that it is designed to detect HCV antibodies. If antibodies are present, then further medical attention and diagnostics are required. If a patient does not have the antibodies, they can be almost certain that they do not have HCV---unless they contracted it very recently. Daniel Maluf, MD, Co-Director of Liver Transplantation, University of Virginia Health System, likes the test. He says, "The test is not only rapid, but it is quite accurate."

Both Dr. Maluf and Ms. Flanigan agree that the new testing guidelines decrease the stigma around testing. Dr. Maluf explains, "Now, it comes down to date of birth. Many people don't remember whether they had a blood transfu-

"Now it comes down to date of birth."

sion as a child, or they don't want to discuss topics they consider taboo, such as injectable drug use or sexual history." The advantages of testing outweigh the inconvenience of taking 20 minutes to get tested. Dr. Maluf notes that if a person is HCV-positive, they can get treated if they have symptoms---and if not, they can get a simple ultrasound each year to check the health of their liver. Being aware of HCV status can not only help people live longer, but put their minds at ease.

NICOLE GRAY

editorial@mediaplanet.com

A CONCERT FOR A CAUSE:

Fighting back against hepatitis C with education, advocacy, and music.

Chronic hepatitis C is a blood-borne disease affecting approximately 130 to 170 million people worldwide, according to the Centers for Disease Control and Prevention, including 3.2 million Americans. Tune In to Hep C, a public health campaign between Merck and the American Liver Foundation is designed to help raise awareness of chronic hepatitis C virus infection.

Living with hepatitis C

According to the National Institutes of Health (NIH), symptoms of chronic hepatitis C virus (HCV) infection include fatigue, jaundice and dark urine. However, approximately 70 to 80 percent of infected individuals don't show any symptoms. HCV leads to liver

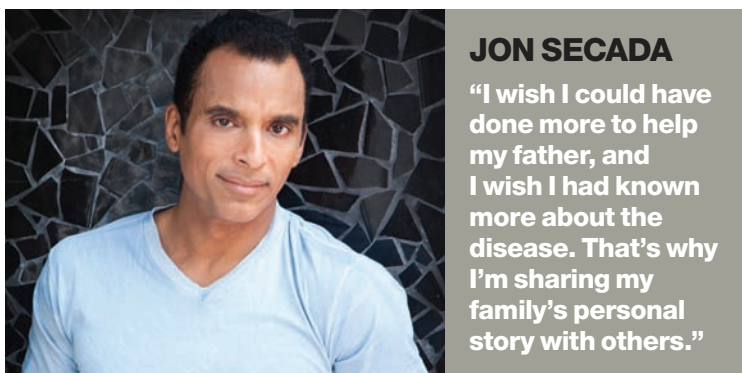
inflammation that can result in cirrhosis, liver disease and liver cancer years after infection.

Speaking out through music

In New York City on July 27, 2011, the night before World Hepatitis Day, Merck and the ALF held the Tune In to Hep C Presents The Allman Brothers Band benefit concert that raised more than \$250,000 for community-based groups supporting people with chronic hepatitis C. The concert featured chronic hepatitis C advocates Natalie Cole, Gregg Allman and Jon Secada. GRAMMY® award-winning R&B singer Cole was diagnosed with chronic hepatitis C in 2008 -- her doctors estimate Cole may have contracted



NATALIE COLE
"One thing is for sure — there's a stigma surrounding hepatitis C because it's associated with IV drug use. But it really doesn't matter how you got the virus. What's important is that you do something about it."



JON SECADA

"I wish I could have done more to help my father, and I wish I had known more about the disease. That's why I'm sharing my family's personal story with others."



GREGG ALLMAN
"Doing nothing is not an option; they need to talk with their doctor."

the virus 25 years ago.

"One thing is for sure — there's a stigma surrounding hepatitis C because it's associated with IV drug use. But it really doesn't matter how you got the virus. What's important is that you do something about it," she said in a press release.

Founding member of the Allman Brothers Band and Rock 'n' Roll Hall of Fame inductee Gregg Allman was diagnosed in 1999 and had a liver transplant in 2010.

"I made the decision to take action and talk to my doctor, so that I could get back to making the music I love," he said in a press release. "I want others to take that action too, and if I can help make that happen, I've done my job." Jon Secada, an award-winning singer and songwriter lost his father to chronic hepatitis C in 2011, inspiring him to encourage awareness. Secada's hepatitis C philosophy is, "You can't be silent with a silent disease."

Taking action

According to the NIH, diagnosing chronic hepatitis C takes a simple blood test. Genetic testing determines which of the six genotypes the patient has, genotype 1 being the most difficult to treat. Treatment involves 24 to 48 weeks of medication to remove the virus.

Continuing to bring down diagnosis rates remains a priority for Merck, who has been a part of the cause for 30 years, according to Patrick Bergstedt, senior vice president and general manager of Infectious Diseases and Global Human Health for Merck.

"It is our hope that these programs, conducted in partnership with the global public health community, will have a lasting and meaningful impact on the prevention, diagnosis and management of chronic hepatitis C."

PETRA CANAN

editorial@mediaplanet.com

FIND OUT IF YOU HAVE HEPATITIS C
IT COULD SAVE YOUR LIFE

BORN FROM 1945-1965?

SOME PEOPLE DON'T KNOW HOW OR WHEN THEY WERE INFECTED

People born from 1945-1965 are **5X MORE LIKELY TO BE INFECTED WITH HEPATITIS C**

3 OUT OF EVERY 4 people with Hepatitis C were born between these years

Up to 75% of people living with Hepatitis C **DO NOT KNOW THEY ARE INFECTED**

Many people can live with **HEPATITIS C** for **DECADES** with **NO SYMPTOMS**

HEP C Blood Test

CDC recommends anyone born from 1945-1965 GET TESTED

TESTED

KNOWING YOU HAVE HEPATITIS C can help you make important decisions about your health

Rx Many people can get **LIFESAVING CARE AND TREATMENT**

Successful treatments can **ELIMINATE THE VIRUS** from the body

NOT TESTED

LEFT UNTREATED, HEPATITIS C can cause liver damage and LIVER FAILURE

HEPATITIS C is the **#1 CAUSE OF LIVER TRANSPLANTS**

HEPATITIS C is a leading cause of **LIVER CANCER**

Don't go down the wrong path, talk to your doctor about getting tested. It could save your life.

CDC U.S. Department of Health and Human Services Centers for Disease Control and Prevention **KNOW MORE HEPATITIS**

NEWS

GETTING SMART ABOUT
VIRAL HEPATITIS

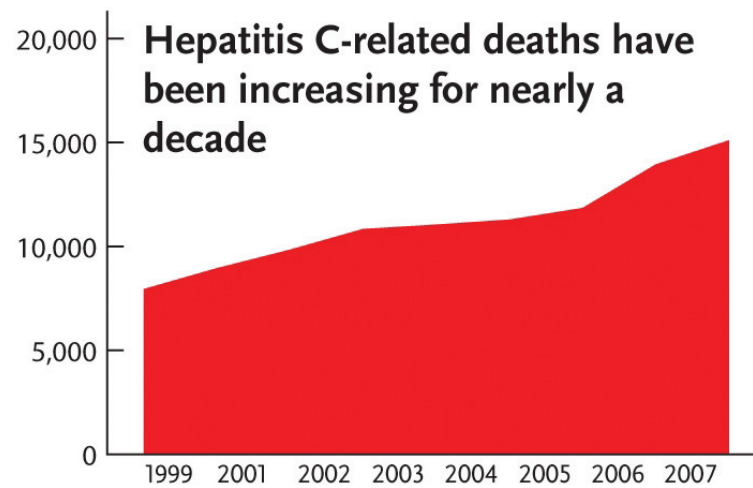
Recently, there has been a lot of positive news about viral hepatitis. In April 2012, investigators were excited about the results of a large clinical trial in which hepatitis C (HCV) was cured in 82 percent of patients treated with a new combination of antiviral drugs. Most exciting was the fact that the drugs could be taken orally and had few side effects, compared with earlier treatment options. It was big news for the advocacy community.

Educators and advocates who focus on the needs of the viral hepatitis community—including HCV and hepatitis B (HBV)—viewed this medical breakthrough as another important step forward; however a lot remains to be done when it comes to disease-state awareness.

What you don't know can kill you

Consider this: Each year, approximately 15,000 HCV-infected individuals die of related causes, as do roughly 5,000 people who are HBV infected. Joan Block, RN, BSN, Executive Director and Co-Founder, Hepatitis B Foundation, explains, "Viral hepatitis is the leading cause of liver cancer in the United States (U.S.) and liver cancer is the only cancer that is increasing in prevalence."

People are dying due to lack of knowledge—not lack of treatment options. Most people—upwards of 75 percent of those infected with HCV and 65 percent of the HBV-infected population—are not aware of it, so over the years, these viruses progress into cirrhosis and liver cancer—the second deadliest cancer after pancreatic cancer. Death rates from HCV doubled between 1999 and 2007, yet treatment options have increased. Michael Ninburg, Executive Director, Hepatitis Education Project, says, "These are disease states that we can eliminate. HCB is vaccine-preventable and HCV is treatable."



SOURCE: CENTERS FOR DISEASE CONTROL AND PREVENTION

No matter what the result, there is treatment

Advocates have a sense of urgency around educating the public. Their focus is on prevention, getting people tested, treatment and providing emotional support. Alan Franciscus, Executive Director Hepatitis C Support Project, is optimistic. He says, "There has been so much improvement in awareness, management, and treatment in the last 15 plus years. I think the biggest change is in HCV treatment. When I was first diagnosed and treated with interferon monotherapy, there was only a 9 percent chance of a cure for my particular strain. Now we have a combination of medications that can cure

up to 80 percent of people who take them."

Through his advocacy work,

"People are dying due to lack of knowledge—not lack of treatment options."

Franciscus and his colleagues emphasize that HCV is a blood-borne disease, which is spread by blood-to-blood contact (as is HBV) and that it is not a death sentence. He urges those infected to take precautions in order to not spread the virus, and also to avoid alcohol, eat a healthy diet and get exercise.

HBV can affect anybody

Regarding HBV, Block calls it "an equal-opportunity virus that can affect anybody." Universal vaccination guidelines for newborns in the U.S. have drastically reduced the rate of new cases of HBV. Block notes that there is a "critical window of opportunity" in the first 12 to 24 hours after birth, during which newborns should be vaccinated. "Without vaccination, a newborn whose mother is HBV-infected has a 90 percent chance of becoming chronically infected."

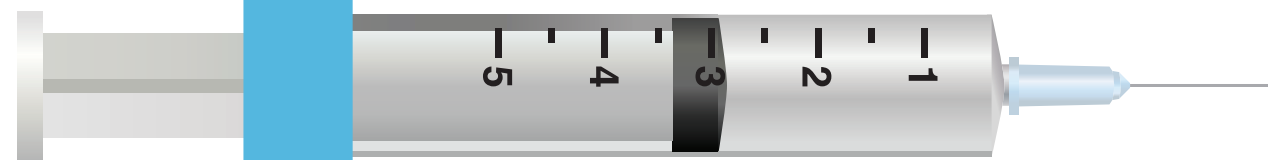
This is a missed opportunity, because HBV is the deadliest vaccine-preventable disease there is," she says. According to the Hepatitis B Foundation, Asian Americans are at particular risk. One in ten Asian Americans has HBV, and two out of three don't know it. Block says, "You can't be treated unless you know it. There are good treatments that can help stop the disease from progressing to liver cancer. It's better to treat sooner, rather than later."

The Hepatitis C Support Project, the Hepatitis B Foundation and the Hepatitis Education Project are on the forefront of helping patients connect the dots between testing, prevention, treatment and support, for patients, clinicians and caregivers. There are also other organizations with both local and national services (see page 5). Health Pro Solutions, a hepatitis C advocacy organization headed up by Andi Thomas has mapped the information to make it easier to find local resources. For more information, please visit: healthpro.us/maps. The Hepatitis B Foundation has done the same for HBV-related resources and information: hepbunited.org.

NICOLE GRAY

editorial@mediaplanet.com

ONE NEEDLE,
ONE SYRINGE,
ONLY ONE TIME.



Safe Injection Practices Coalition

www.ONEandONLYcampaign.org

The One & Only Campaign is a public health campaign, led by the Centers for Disease Control and Prevention

and the Safe Injection Practices Coalition, to raise awareness among patients and healthcare providers about

safe injection practices. The campaign aims to eradicate outbreaks resulting from unsafe injection practices.

The CDC Foundation is a founding partner and serves as the coordinating organization of the coalition.



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INSPIRATION



QUESTION
& ANSWER



Jonathan
McCone, Jr.,
MD, FACP, AGAF

What are the most
common symptoms of
hepatitis C?

Symptoms are late— often after decades. A small scarred liver cannot make proteins and clear poisons— confusion, forgetfulness, swelling of legs and abdomen, yellow eyes, dark urine and itching, enlarged esophageal veins under pressure may rupture and bleed and skin bruising from low platelets may occur. Goal: be cured of virus before these signs and symptoms occur.

If diagnosed, how
should people alter their
lifestyle?

AVOID ALCOHOL — it accelerates the disease and makes a cure less likely. Avoid anything that might transfer blood: sharing toothbrushes, needles, razors, manicure or pedicure instruments. Basically it's not a sexually transmitted disease- but transmission can occur if rough sex results in bleeding, during ano-receptive intercourse without condoms, or if a partner is HIV positive.

What's the biggest
misconception
surrounding HCV?

That it is like HIV/AIDs, that it cannot be cured, that transmission is easy by touching, kissing, breathing, or sharing eating utensils, that if you're not sick and have normal standard blood tests you are ok.

What steps can be taken
to protect myself and my
loved ones?

Avoid the risky blood sharing behavior mentioned in #2-avoid alcohol, get a HCV antibody test. IT CAN BE CURED.

JONATHAN MCCONE JR.
editorial@mediaplanet.com

CONGRESSIONAL COURAGE

Mediaplanet sits with Congressman Henry “Hank” Johnson

Question: What was your
reaction when you were first
diagnosed with Hepatitis C?

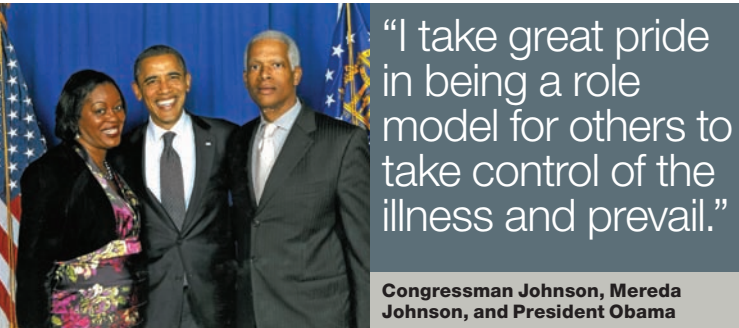
Answer: On the evening that I got word of my diagnosis I had already planned to go (roller) skating, and I decided not to change my plans. I felt “shell-shocked” and alone in the rink full of people. My thoughts were of contracting cancer of the liver or cirrhosis, resulting in the need for a liver transplant. The doctor had told me that I had about 20 years to live, so I made a determination, while skating, to fight and conquer this disease.

Q: How did your family
and friends respond to the
news?

A: My family was very supportive. My wife Mereda has stood by my side from the beginning, and she provided strength in helping me overcome this illness. When I was weak, she was strong. She has been my rock throughout this entire process.

Q: What led you to your role
in Congress?

A: As a kid growing up in Washington, D.C., I decided to become a lawyer like my cousin Archibald Hill, Sr. (Tokey). My mother got me interested in politics by requiring me to read the articles on the front page of The Washington Post to her as she washed dishes after



“I take great pride
in being a role
model for others to
take control of the
illness and prevail.”

Congressman Johnson, Mereda
Johnson, and President Obama

dinner. With that interest in public affairs, and when Tokey won a seat in the Oklahoma legislature, it became a part of my mindset that I would someday become a congressman.

Q: What was the most
difficult part about
managing your treatment
with your career?

A: During the yearlong fight to pass the Affordable Care Act, I was undergoing a debilitating round of hep C treatments, and my thoughts were of those who did not have the means to access the same health care that I was privileged to be receiving. My illness helped motivate me to become a strong advocate for passage of the ACA, as well as other legislation that promotes the health, safety and prosperity of all the people. There were days when I was weak, but because of the hard work and dedication of my staff in D.C. and back home, we never missed a beat.

Q: What type of message
about hep C do you want to
get across to Capitol Hill?

A: The critical need for access to quality, affordable health care for all Americans. Thankfully, I had access to great care, but not everyone is so lucky. The Affordable Care Act is a step in the right direction, and now that the ACA has been upheld, we must rededicate ourselves to ensuring that all Americans have the care

they need to live healthy, productive lives.

Q: Now that you've been
proclaimed cured of hep C,
what do you take with you?

A: That I'm not alone—and that I must do all I can to help others who are suffering from this silent epidemic. I've become a face for the disease—and while I don't want hep C to be the sole thing that defines me— I take great pride in being a role model for others to take control of the illness and prevail.

Q: As a country, what are
our next steps in the fight
against hep C?

A: More funding—not just simply to raise awareness but in research and testing. Specifically, I'm asking for my colleagues to support H.R. 3381, the Viral Hepatitis Testing Act of 2011. We can save lives and help others avoid the needless suffering and debilitating medical costs associated with treating this disease.

HENRY “HANK” JOHNSON
editorial@mediaplanet.com

This summary contains important information about Ribasphere® RibaPak®. It is not meant to take the place of your doctor's instructions. Read this information carefully before you start taking Ribasphere® RibaPak®. Ask your doctor or pharmacist if you do not understand any of this information or if you want to know more about Ribasphere® RibaPak®. Also read the Medication Guide for PEGASY®¹ (peginterferon alfa-2a).

WARNING: RISK OF SERIOUS DISORDERS AND RIBAVIRIN-ASSOCIATED
EFFECTS

See full prescribing information for complete boxed warning

- You should not take Ribasphere (ribavirin, USP) alone to treat chronic hepatitis C infection.
- Ribasphere may cause you to have a blood problem (hemolytic anemia) that can worsen any heart problems you have, and cause you to have a heart attack or die. People with a history of serious heart disease should not be treated with this medicine. Please talk to your health care professional to see if this medicine is right for you.
- Ribasphere may cause birth defects or death of your unborn baby. You should not take this medicine if you are pregnant or your sexual partner is pregnant, nor should you or your partner become pregnant while you are taking Ribasphere and for 6 months after you stop treatment. You need to use two forms of reliable birth control when you take Ribasphere and for the 6 months after treatment.

What is Ribasphere (ribavirin, USP):

Ribasphere (ribavirin, USP) is a medicine used with another medicine called peginterferon alfa-2a to treat chronic (lasting a long time) hepatitis C infection in people whose liver still works normally, and who have not been treated before with a medicine called an interferon alpha. It is not known if Ribasphere is safe and will work in children under 18 years of age.

Do Not Take Ribasphere (Ribavirin, USP) if you:

- are pregnant or plan to become pregnant
- have certain types of hepatitis caused by your immune system attacking your liver (autoimmune hepatitis)
- have certain blood disorders, such as thalassemia major or sickle-cell anemia (hemoglobinopathies)
- have severe kidney disease
- take didanosine (Videx^{®2} or Videx EC[®])

The most important information I should know about Ribasphere (ribavirin, USP) is:

1. You should not take Ribasphere alone to treat chronic hepatitis C infection. Ribasphere (ribavirin, USP) should be used with peginterferon alfa-2a to treat chronic hepatitis C infection.
2. Ribasphere may cause you to have a blood problem (hemolytic anemia) that can worsen any heart problems you have, and cause you to have a heart attack or die. Tell your healthcare provider if you have ever had any heart problems. Ribasphere may not be right for you. If you have chest pain while you take Ribasphere, get emergency medical attention right away.
3. Ribasphere may cause birth defects or death of your unborn baby. If you are pregnant or your sexual partner is pregnant, do not take Ribasphere. You or your sexual partner should not become pregnant while you take Ribasphere and for 6 months after treatment is over. You must use two forms of birth control when you take Ribasphere and for the 6 months after treatment.
- Females must have a pregnancy test before starting Ribasphere, every month while treated with Ribasphere, and every month for the 6 months after treatment with Ribasphere.
- If you or your female sexual partner becomes pregnant while taking Ribasphere or within 6 months after you stop taking Ribasphere, tell your healthcare provider right away. You or your healthcare provider should contact the Ribavirin Pregnancy Registry by calling 1-800-593-2214. The Ribavirin Pregnancy Registry collects information about what happens to mothers and their babies if the mother takes or is exposed to Ribasphere while she is pregnant.

The most serious side effects of Ribasphere (ribavirin, USP) are:

- Swelling and irritation of your pancreas (pancreatitis). You may have stomach pain, nausea, vomiting or diarrhea.
 - Severe allergic reactions. Symptoms may include hives, wheezing, trouble breathing, chest pain, swelling of your mouth, tongue, or lips, or severe rash.
 - Serious breathing problems. Difficulty breathing may be a sign of a serious lung infection (pneumonia) that can lead to death.
 - Serious eye problems that may lead to vision loss or blindness.
 - Liver problems. Some people may get worsening of liver function. Tell your healthcare provider right away if you have any of these symptoms: stomach bloating, confusion, brown urine, and yellow eyes.
 - Severe depression
 - Blood disorder involving low levels of red blood cells (anemia).
 - Suicidal thoughts and attempts
- Call your healthcare provider or get medical help right away if you have any of the symptoms listed above. These may be signs of a serious side effect of Ribasphere (ribavirin, USP) treatment.

Common side effects of Ribasphere (ribavirin, USP) taken with peginterferon
alfa-2a includes:

- flu-like symptoms-feeling tired, headache, shaking along with high temperature (fever), and muscle or joint aches
- mood changes, feeling irritable, anxiety, and difficulty sleeping
- loss of appetite, nausea, vomiting, and diarrhea
- hair loss
- itching

Before you take Ribasphere (ribavirin, USP), tell your healthcare provider if you have or
have had:

- treatment for hepatitis C that did not work for you
- serious allergic reactions to Ribasphere
- breathing problems. Ribasphere may cause or worsen your breathing problems you already have.
- vision problems. Ribasphere may cause eye problems or worsen eye problems you already have. You should have an eye exam before you start treatment with Ribasphere.
- certain blood disorders such as anemia
- high blood pressure, heart problems or have had a heart attack. Your healthcare provider should test your blood and heart before you start treatment with Ribasphere.
- thyroid problems
- diabetes. Ribasphere and peginterferon alfa-2a combination therapy may make your diabetes worse or harder to treat.
- liver problems other than hepatitis C virus infection
- human immunodeficiency virus (HIV) or other immunity problems
- mental health problems, including depression or thoughts of suicide
- kidney problems
- an organ transplant
- drug addiction or abuse
- infection with hepatitis B virus
- any other medical condition
- are breast-feeding. It is not known if Ribasphere passes into your breast milk. You and your healthcare provider should decide if you will take Ribasphere or breast-feed.

Medicine Interactions:

Tell your healthcare provider about all the medicines you take, including prescription and non-prescription medicines, vitamins and herbal supplements. Some medicines can cause serious side effects if taken while you also take Ribasphere. Some medicines may affect how Ribasphere works or Ribasphere may affect how your other medicines work. Especially tell your healthcare provider if you take any medicines to treat HIV, including didanosine (Videx^{®2} or Videx EC[®]), or if you take azathioprine (Imuran^{®3} or Azasan^{®4}).

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Important Safety Information about Ribasphere RibaPak (ribavirin, USP) Tablets

Ribasphere® RibaPak® (ribavirin, USP) Tablets is a medicine used with another medicine called peginterferon alfa-2a to treat chronic hepatitis C infection in adults whose livers still work normally, and who have not been treated before with a medicine called an interferon alpha.

The following is the most important information you should know about Ribasphere RibaPak:

- 1. You should not take Ribasphere (ribavirin, USP) alone to treat chronic hepatitis C infection.**
- 2. Ribasphere may cause you to have a blood problem (hemolytic anemia) that can worsen any heart problems you have, and cause you to have a heart attack or die. People with a history of serious heart disease should not be treated with this medicine. Please talk to your health care professional to see if this medicine is right for you.**
- 3. Ribasphere may cause birth defects or death of your unborn baby. You should not take this medicine if you are pregnant or your sexual partner is pregnant, nor should you or your partner become pregnant while you are taking Ribasphere and for 6 months after you stop treatment. You need to use two forms of reliable birth control when you take Ribasphere and for the 6 months after treatment.**

For more information, please see the Ribasphere RibaPak (ribavirin, USP) Tablets Brief Summary of safety information on the previous page. Please see full Prescribing Information available at RibaPak.com. Safety information for other drugs you may take as part of combination therapy should also be reviewed before you begin treatment. Be sure to talk to your doctor or other health care professional.

Ribasphere® RibaPak®
(ribavirin, USP) Tablets