

Mailing Address:

c/o Macsata-Kornegay Group PO Box 15275 Washington, DC 20003

Physical Address: 1724 Florida Avenue, NW

1724 Florida Avenue, NW Washington, DC 20009

Chief Executive Officer:

William E. Arnold Phone: (202) 290-2019 Fax: (202) 506-6504 Email: weaids@tiicann.org

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HIV/HCV Co-Infection Watch Enters its Fourth Year

Monthly publication offers a patient-centric informational portal serving three primary groups – patients, healthcare providers, and AIDS Service Organizations

WASHINGTON, DC (January 10, 2018) – The Community Access National Network, otherwise known as CANN, announced today that its groundbreaking HIVHCV Co-Infection Watch would continue in 2018, representing its fourth year in publication. The HIV/HCV Co-Infection Watch offers a patient-centric informational portal serving three primary groups – patients, healthcare providers, and AIDS Service Organizations.

According to the Centers for Disease Control & Prevention (CDC), approximately 25% of people living with HIV/AIDS are also co-infected with Hepatitis C (HCV). The CDC also estimates that between 50%-90% of people living with HIV/AIDS who inject drugs are co-infected with HCV. People living with HIV-infection face a higher risk of long-term liver failure as a result of co-infection with HCV. As such, treating co-infection is of paramount importance.

"Our HIV/HCV Co-Infection Watch is ideal for professionals in public health or public policy who have concerns about HIV and HCV co-infection," said William E. Arnold, CANN's President & CEO. "It is a convenient, one-stop portal with information about co-infection as it relates to drug formularies under State AIDS Drug Assistance Programs, State Medicaid Programs, and Veterans Affairs. It also includes updates on harm reduction policies, and other resources aimed at combatting this growing epidemic."

To learn more about the publication, or sign-up to receive timely updates about co-infection please visit http://tiicann.org/co-infection-watch.html.

For general information, please contact CANN at info@tiicann.org.

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About the Community Access National Network: The mission of the Community Access National Network (CANN) is to define, promote, and improve access to healthcare services and supports for people living with HIV/AIDS and/or Viral Hepatitis through advocacy, education, and networking. These services must be affordable to the people who need them regardless of insurance status, income, or geographic location.