

Indian Health Service Clinical Strategic Initiative Chronic Liver Disease



Background:

Chronic Liver Disease (CLD) is among the top 10 leading causes of death in the United States and represents a major health disparity resulting in premature death among American Indian and Alaska Native people (AI/AN). According to data from the Centers for Disease Control and Prevention (CDC), CLD is the second leading cause of death for non-Hispanic American Indians and Alaska Natives ages 25-54 years. IHS remains committed to reducing AI/AN health disparities through systematic quality-improvement clinical performance strategies. Mitigating the risk of CLD-related illness and death in AI/AN populations requires a proactive approach that prioritizes evidence-based prevention, screening, early diagnosis and treatment in tribal communities.

Strategic Initiative:

IHS advocates a comprehensive strategy to reduce CLD-related morbidity and mortality among AI/AN people. As part of our <u>National Chronic Liver Disease Initiative</u>, IHS will support federal, tribal, and Urban Indian Organization (I/T/U) programs as they develop and implement strategies to ensure the guideline-based prevention, screening, diagnosis and treatment of;

- Hepatitis C infection, including elimination efforts in tribal communities
- Alcoholic Liver Disease
- Non-alcoholic Fatty Liver Disease/Metabolic Dysfunction-associated Steatohepatitis
- Cirrhosis and Liver Cancer

Guidance and Resources:

IHS Areas and I/T/U Facilities are encouraged to collaborate with tribal, local, regional, state, academic/professional and federal partners to support a proactive approach to enhance awareness of CLD and risk-factors, take measures to mitigate the risks of CLD, and support evidence-based diagnosis and treatment of CLD through activities such as health education, screening and early diagnosis, and team-based clinical care. In addition, a proactive multi-disciplinary approach is advocated that involves **Area and Facility** leadership as well as staff in medical, pharmacy, nursing, care management/referral care, information technology, and other support roles.

Areas and Facilities are encouraged to;

- Implement guideline-based strategies for the prevention, screening, diagnosis and management of CLD and associated conditions as a routine part of CLD-related care in IHS clinical settings as well as care management/planning, including referral care.
- Support innovative approaches to enhance evidence-based care for CLD in tribal communities. These include education regarding CLD risk factors, screening & early intervention, and system-based protocols to ensure care that aligns with clinical guidelines.