Fighting Hepatitis in Boston’s Chinatown

Inspired by grieved family loss and public health’s prevention ethos, Master of Science student Leslie Hsu teamed up with Michael Tran, a Harvard Medical School student, last year and set about to organize a free hepatitis B screening and vaccination program in Boston’s Chinatown. After a year of many negotiations and much change to the project’s original conception as a drop-in center, the program finally got underway earlier this year at the South Cove Community Health Center.

The whole experience has been intensely gratifying, says Hsu. But she has also learned that while the road to a public health program may start with good intentions, it takes a lot more than good intentions to get you there. “Just wanting to do something good is not going to make a project successful. It takes being flexible, establishing credibility, and forming partnerships,” says Hsu.

Hsu, a second-year student specializing in health communication in the Department of Health and Social Behavior, lost both her mother and her younger brother to liver cancer caused by a hepatitis B infection. Watching the long struggle of her brother and mother—the harsh and ultimately futile medicine—steered Hsu toward a career in prevention-minded public health. “I was very much a believer in medicine. But prevention is so important. It is so key to just educate people about these problems ahead of time,” she says.

In the case of liver cancer, the avoidable problem is hepatitis B
infection. Partly because of some key studies done in the 1970s and early 1980s by epidemiologists at the School, it has now been well-established that chronic hepatitis B infection is a major risk factor for the most common type of primary liver cancer.

The nexus between hepatitis B infection and liver cancer looms as a special threat to the health of Asian and Pacific Islanders in the United States because the hepatitis B infection rates are so much higher in those groups than in the general population. Between 8 and 15 percent of Asian women in the U.S. and Canada are infected with hepatitis B, compared to 2 percent of women in the general population. In Boston, a popular place for Southeast Asian immigrants to settle, the difference is even more striking. For 1990-95, the average annual hepatitis B incidence rate among Asians was 200 per 100,000, which was 30 times the average annual incidence rate of 6.6 per 100,000 for whites and 7 times the 28 per 100,000 rate for blacks.

For Hsu, all of this information incandesced into a clear idea: “It is very simple—all you have to do is get vaccinated. Get these three shots and you never have to worry about this.” Hsu and Tran got the ball rolling over a year ago, mobilizing medical and public health students from Harvard, Tufts, and Boston University. They worked on creating a web of different arrangements with community centers, businesses, and pharmaceutical companies. Many hours and meetings later, the result was the Hepatitis B Education and Prevention Boston Initiative, a team of 21 graduate students supported by advisors from the Harvard School of Public Health, Harvard Medical School, and the Boston Schweitzer Fellows Program.

Rare is the public health program that doesn’t require a fair bit of diplomacy: there are almost always other programs, institutions and interests to work with and navigate around. But as Beverly Wing, project coordinator for the Boston-based Asian Health Collaborative and mentor to the Hepatitis B Initiative, points out, the success of this student-initiated effort was especially dependent on coordinating with others. As Harvard students, they were outsiders in Chinatown, notes Wing, and “they needed an entrée into the community.” Also, if the program was to include actual administration of hepatitis B vaccines, they would have to get the help of medical professionals; as students, they couldn’t give the shots themselves. Hsu says she had no idea how much negotiation and coordination would be involved in a supposedly “simple” vaccination program.

The time and effort of launching the hepatitis B project has stretched Hsu and Tran, but Wing says these Harvard students stand out for a couple of reasons. “They are such a responsible group,” she says, noting how they worked at fine tuning their program, making the needed adjustments and keeping in close contact. Hsu has been remarkably diligent and thorough, says Wing: “Her commitment is so strong. She started this—and she is going to see it through.”

Hsu, Tran and the others worked for months to get a donation of 600 doses of hepatitis B vaccine from Merck & Co. They got Beth Israel-Deaconess Hospital to agree to donate 400 screening tests. Their original vision of a kind of hepatitis B drop-in center has been modified somewhat to bi-monthly hepatitis B sessions at the South Cove health center. The target group is people age 24 and under. The students have also now started a “culturally appropriate” media campaign to advertise the program.

Hsu has been working on the hepatitis B project for over a year. She admits to being visited by doubts and frustration along the way. “But I just keep on going back to why I started this program,” she says, recalling her mother and her brother. “Even if just three people show up, that keeps three people and their families from suffering from the consequences of hepatitis B—that is what keeps me going.”