The Fierce Urgency of Now:

How the VA is Uniquely Equipped to Lead in Addressing the Challenges of NASH and Why It Must

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Agenda

What we'll cover today:

- One Marine's Challenge
- Too Many NASH Patients' Journey
- New Developments from the Field → Going Beyond the Biopsy
- Ways VA Providers Can Help
- Resources from GLI for Providers
- Questions & Answers



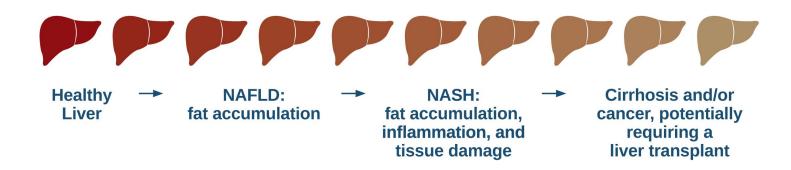
One Marine's Story





What is NAFLD/NASH?

- Nonalcoholic fatty liver disease (NAFLD) is a condition where there is too much fat built up in the liver. If left untreated, it can lead to serious liver problems.
- Nonalcoholic steatohepatitis (NASH) is caused when that extra fat turns into inflammation (swelling in the liver) and fibrosis (scarring) of the liver. If severe enough, that can lead to cirrhosis or liver cancer, potentially requiring a liver transplant.





Too Many NASH Patients

- It is estimated that up to 40 million people in the U.S., including 10% of American children, are living with NASH.
- The VA provides care to over 9 million Veterans enrolled in the VA.
- **12-fold increase in active service members diagnosed** with NAFLD from 2000-2017.
- Common comorbidities for NASH: High blood pressure, diabetes, high blood cholesterol, and triglycerides
 - 25% of patients in the VA system have type 2 diabetes.
 - 78% obesity rate among VA health patients.
 - 1 in 10 patients who are obese may have asymptomaticaly advanced to liver disease from benign fatty liver without detection.



GLI Initiatives

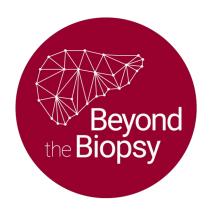


The first patient-driven collaborative advocacy effort to address NASH in the U.S.



Held the second Thursday in June with partners from around the globe

June 10, 2021



Initiative promoting awareness and education about the use of non-invasive diagnostics as an alternative to biopsies



2019 International NASH Day



Kim Martinez, patient advocate, and Dr. Nadege Gunn, former U.S. Air Force.

Learn more about NASH Day at www.international-nash-day.com





Reluctance to Screen





Psychosocial Issues

Hurdle

- Low awareness of liver health, NAFLD/NASH
- Low awareness = Disease detected at later stages.

- Creation of NASH Council
- Education and Awareness
 Campaigns: The Language of NASH
- International NASH Day
- GLI Live



Levels of Reluctance Consensus on Screening No Clear Clinical Pathway Psychosocial Issues

<u>Hurdle</u>

- Complex, multi-faceted disease
- Heterogeneous patient population
- Lack of screening = Disease progresses

- Beyond the Biopsy Initiative
- Clinical Workflow Workgroup
- Patient/Clinician Education





Hurdle

 Over-reliance on liver biopsy → risky, invasive, expensive, sampling variability

- Beyond the Biopsy Initiative
- Partnership with NIMBLE Consortium
- NASH Council Policy Workgroup



Levels of Reluctance to Screen on Screening No No Clear Clinical Pathway Psychosocial Issues

Hurdle

- Assigning patients to the right specialist for care
- Heterogeneity of Management
- Lack of FDA-approved medication

- Clinical Workflow Workgroup
- NASH Council Policy Workgroup



Levels of Awareness

Reluctance to Screen





Psychosocial Issues

Hurdle

Emotional, social, and financial impacts

- Lifestyle Workgroup
- Live and Online Support Groups (launching 2021)



Ways VA Providers Can Help

Through a commitment by all stakeholders to work together in a strategic way, we can prevent the unnecessary loss of lives to NASH and the most closely associated diseases such as diabetes, obesity, and heart disease.

Clinical:

- Learn how and when to use non-invasive diagnostics to diagnose, stage, and monitor progress/response of patient
- Provide coordinated team care within the VA including dieticians, nutritions, exercise specialists, and bariatrics as appropriate (consider establishing integrated fatty liver disease clinic at VA facilities)
- Participate in training on patient-provider communication to improve discussions of diagnosis, prognosis, risks, and treatment options at each stage of NASH

VA Health System:

- Clarify coordinated care pathways within existing VA resources for early and advanced stage NASH patients including access to services with primary care, specialists for concurrent/ comorbid conditions, hepatologists, and diet/ exercise/behavioral counseling
- Expand procurement, training, and accessibility of noninvasive diagnostics throughout the VA health system
- Establish or expand veteran's education initiatives particularly for at-risk populations





GLI Resources





2021 Priorities

5 Things that NASH Patients and Caregivers Need Most:

- 1. Awareness and Sense of Urgency to Act
- 2. Updated Guidelines for Standards of Care and Care Pathways
- 3. Adoption and Reimbursement of Non-Invasive Diagnostics
- 4. An FDA- and EMA-Approved Therapeutic
- 5. Integration into Public Health Priorities



Questions?

Thank you!





