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## **MEDIA RELEASE: Federal Court Orders DOC to Provide Hepatitis C Treatment to Mumia Abu-Jamal**

*Mumia to receive treatment with direct-acting antiviral medications within 21-days*

January 3, 2017: Federal district court judge Robert Mariani granted political prisoner Mumia Abu-Jamal's request for a preliminary injunction, forcing the Pennsylvania Department of Corrections (DOC) to provide him with direct-acting antiviral (DAA) drugs capable of curing his chronic hepatitis C infection. During an evidentiary hearing in December 2015, it was shown that Abu-Jamal had a chronic hepatitis C infection that was progressively attacking his liver, causing scarring, a severe, itchy, painful skin rash that had lasted more than 18 months, and anemia of chronic disease.

Mr. Abu-Jamal is represented by Bret Grote of the Abolitionist Law Center and attorney Robert J. Boyle. "We are gratified by Judge Mariani's decision and urge the PA DOC to administer these life saving drugs to Mr. Abu Jamal without further delay," said Robert J. Boyle on hearing the news of the courts decision. Bret Grote, Legal Director at the Abolitionist Law Center and attorney representing Mumia Abu-Jamal said, "This is the first case in the country in which a federal court has ordered prison officials to provide an incarcerated patient with the new [hepatitis C] medications that came on the market in 2013."

The legal victory comes after judge Mariani denied an earlier request for a preliminary injunction, holding that Abu-Jamal had failed to file his lawsuit against the correct defendants. However, the judge also held at that time that the DOC's treatment protocol for hepatitis C violated the Eighth Amendment's prohibition on cruel and unusual punishment, and once members of the DOC's Hepatitis C Treatment Committee were added as defendants the judge could issue a favorable injunction. The current decision follows the filing of a related case by attorneys for Abu-Jamal on September 30, 2016, which included members of the Hepatitis C Treatment Committee as defendants.

Quoting from his earlier decision, judge Mariani described the DOC's protocol for hepatitis C treatment:

[T]he effect of the protocol is to delay administration of DAA medications until the inmate faces the imminent prospect of "catastrophic" rupture and bleeding out of the esophageal vessels. Additionally, by denying treatment until inmates have "advanced disease" as marked by esophageal varices, the interim protocol prolongs the suffering of those who have been diagnosed with chronic Hepatitis C and allows the progression of the disease to accelerate so that it presents a greater threat of cirrhosis, hepatocellular carcinoma, and death of the inmate with such disease.



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The judge also rejected the DOC’s argument that recent changes to the protocol had resolved the constitutional violation, holding that the new protocol “suffers from the same fatal flaw as the interim protocol” because it “refuses, without medical justification, to provide treatment... and also imposes an unreasonable condition—having vast fibrosis or cirrhosis—on treatment.”

There are more than 5,400 people in DOC custody with chronic hepatitis C, and more than 99% of them are not receiving treatment. Newly developed medications have a cure rate of 95% or more in clinical trials, but the DOC has been refusing to provide the cure due to its high cost.

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