

The role of international organisations in the elimination of hepatitis: The European Centre for Disease Prevention and Control

Viral Hepatitis Prevention Board meeting 5th April 2023
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ECDC – European Centre for Disease Prevention and Control



- An agency of the European Union founded in 2005, located in Solna, Sweden
- Currently 326 employees & 24 EU nationalities
- Budget in 2022: almost 96 million euros

ECDC mission & role

To identify, assess and communicate current and emerging threats to human health posed by infectious diseases.

Disease
Surveillance &
Epidemic
intelligence

Response support
& Risk assessments
Preparedness &
capacity
strengthening

Scientific advice &
guidance

EU and external
stakeholders &
Country support

Public health
training

Communication

Vaccine-preventable diseases
and Immunisation

Sexually transmitted
infections, Blood-Borne Viruses
and Tuberculosis

Antimicrobial resistance and
healthcare-associated
infections

Emerging, Food and vector-
borne diseases

Partners



Strengthened ECDC mandate

- Epidemiological **surveillance** via integrated systems enabling real-time surveillance
- **Preparedness** and **response** planning, reporting and auditing
- Provision of non-binding **recommendations** and options for risk management
- Capacity to mobilise and deploy **EU Health Task Force**
- Network of EU reference **laboratories**
- Wider **global reach**



The Hepatitis B and C Network

- The Network was set up by ECDC in 2010 with the first meeting held in Stockholm in March 2011
- Network comprises of representatives from all EU/EEA Member States
- Subgroup of network members formed the 'Coordination Committee'
- Initial focus of the network was to develop and implement a surveillance system for new diagnoses of acute and chronic hepatitis B and C



ECDC's programme of work in supporting countries reach the hepatitis elimination goals

Support in understanding epidemiological situation

- Surveillance newly diagnosed infections
- Generation robust data on prevalence, morbidity, mortality, etc

Monitoring of responses to hepatitis B/C

- Monitoring programme to support countries in assessing progress towards the elimination of hepatitis

Provision of technical support

- Technical support to EU/EEA countries
- Development of evidence based guidance

Hepatitis B and C surveillance timeline

1st data collection

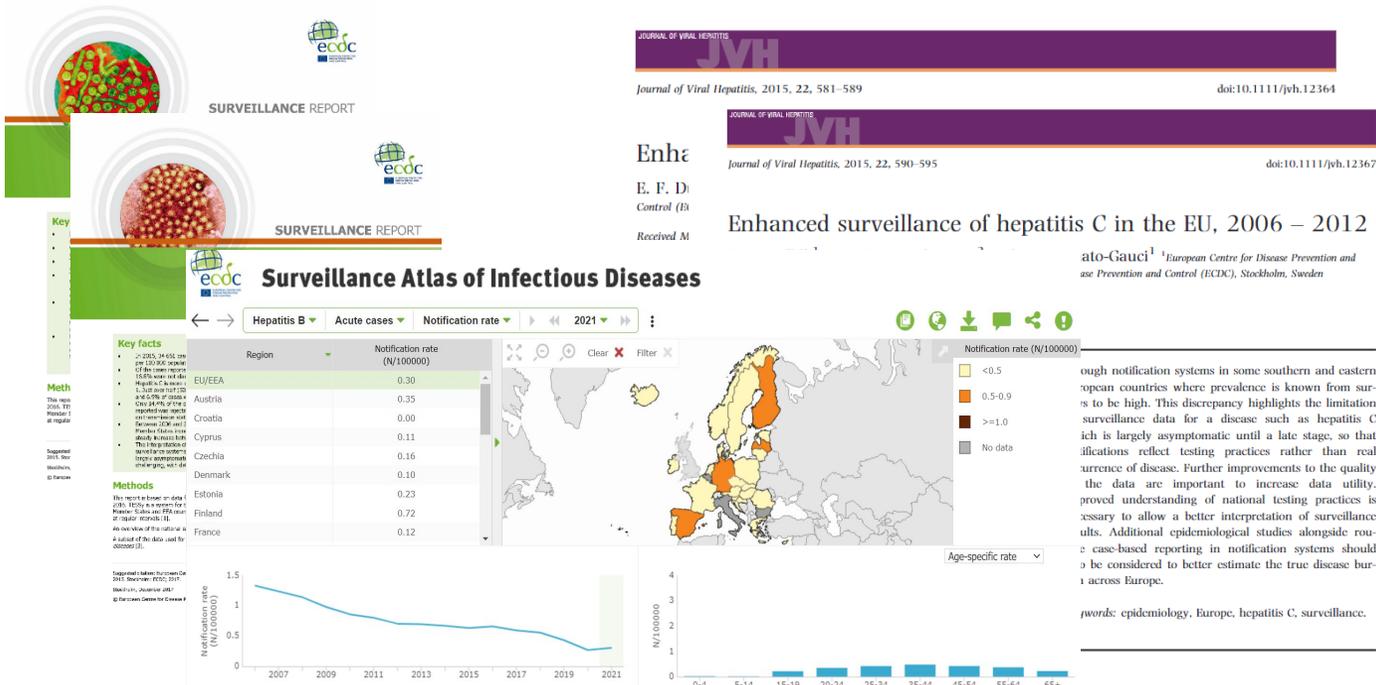
Surveillance review

Case definition

Metadata revision

Metadata revision

Metadata/
case definition revision

Surveillance Atlas of Infectious Diseases

Hepatitis B | Acute cases | Notification rate | 2021

Region	Notification rate (N/100000)
EU/EEA	0.30
Austria	0.35
Croatia	0.00
Cyprus	0.11
Czechia	0.16
Denmark	0.10
Estonia	0.23
Finland	0.72
France	0.12

Key facts

- 2020: 24 652, 2019: 24 520, 2018: 24 480 acute cases reported in EU/EEA
- EU/EEA notification rate: 0.30 (2020)
- EU/EEA notification rate: 0.30 (2019)
- EU/EEA notification rate: 0.30 (2018)

Methods

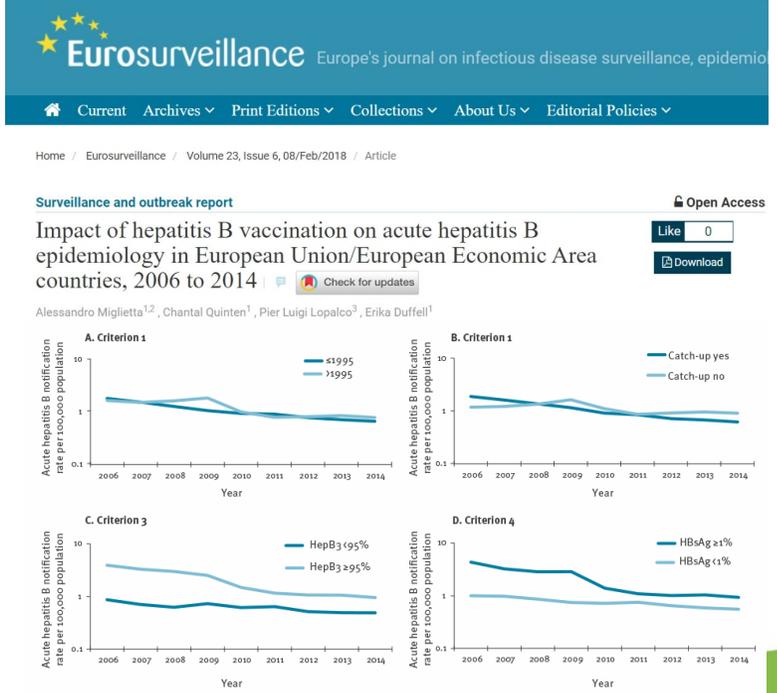
This report is based on data from 2015 to 2020. The notification rate is calculated as the number of notified cases per 100 000 population per year.

Notification rate (N/100000)

- <0.5
- 0.5-0.9
- >=1.0
- No data

Age-specific rate

0-4 5-14 15-19 20-24 25-34 35-44 45-54 55-64 65+



Eurosurveillance Europe's journal on infectious disease surveillance, epidemiology and control

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Surveillance and outbreak report [Open Access](#)

Impact of hepatitis B vaccination on acute hepatitis B epidemiology in European Union/European Economic Area countries, 2006 to 2014

Alessandro Miglietta^{1,2}, Chantal Quinten¹, Pier Luigi Lopalco³, Erika Duffell¹

A. Criterion 1

Acute hepatitis B notification rate per 100000 population

Year

Legend: ≤1995, >1995

B. Criterion 1

Acute hepatitis B notification rate per 100000 population

Year

Legend: Catch-up yes, Catch-up no

C. Criterion 3

Acute hepatitis B notification rate per 100000 population

Year

Legend: HepB3 <95%, HepB3 ≥95%

D. Criterion 4

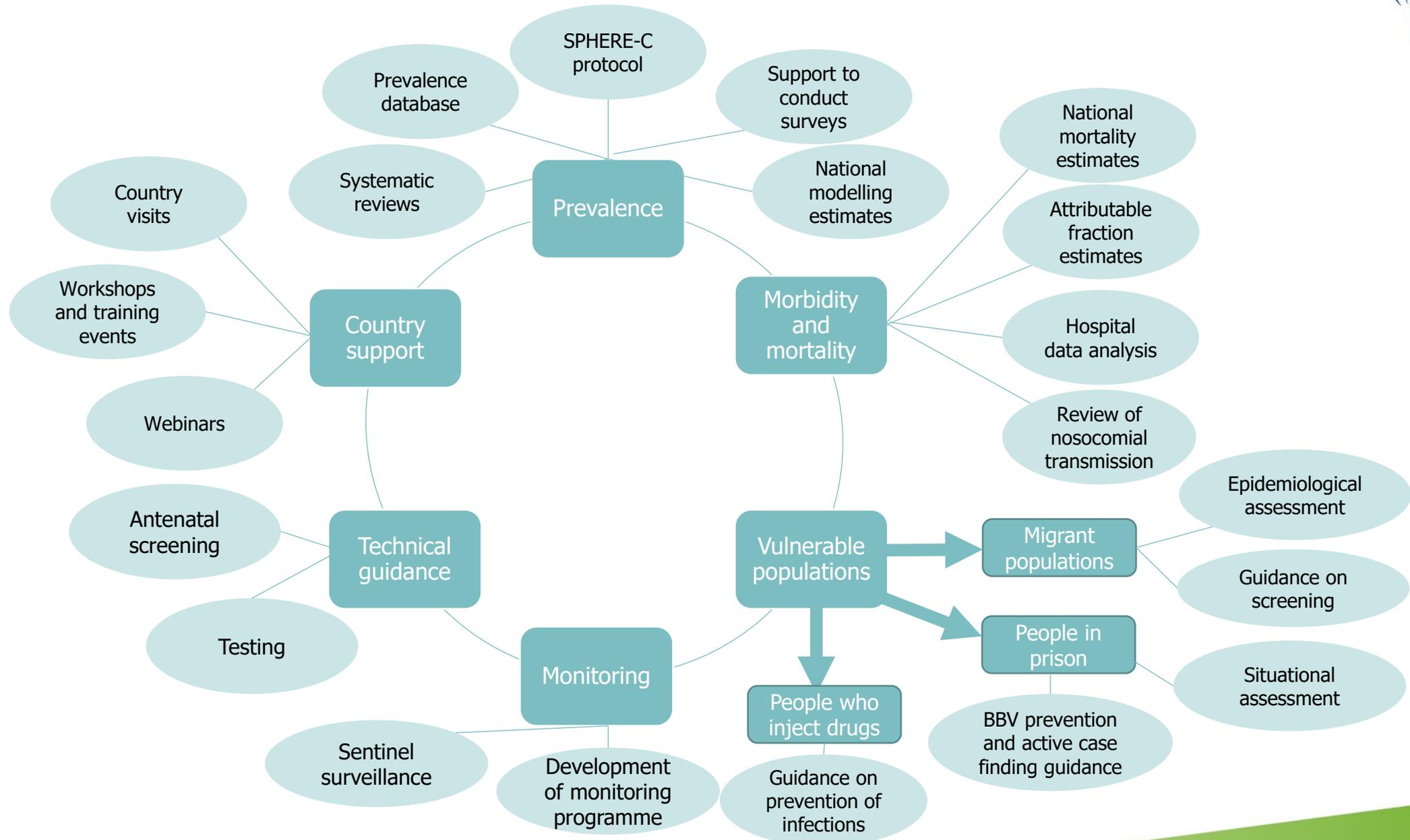
Acute hepatitis B notification rate per 100000 population

Year

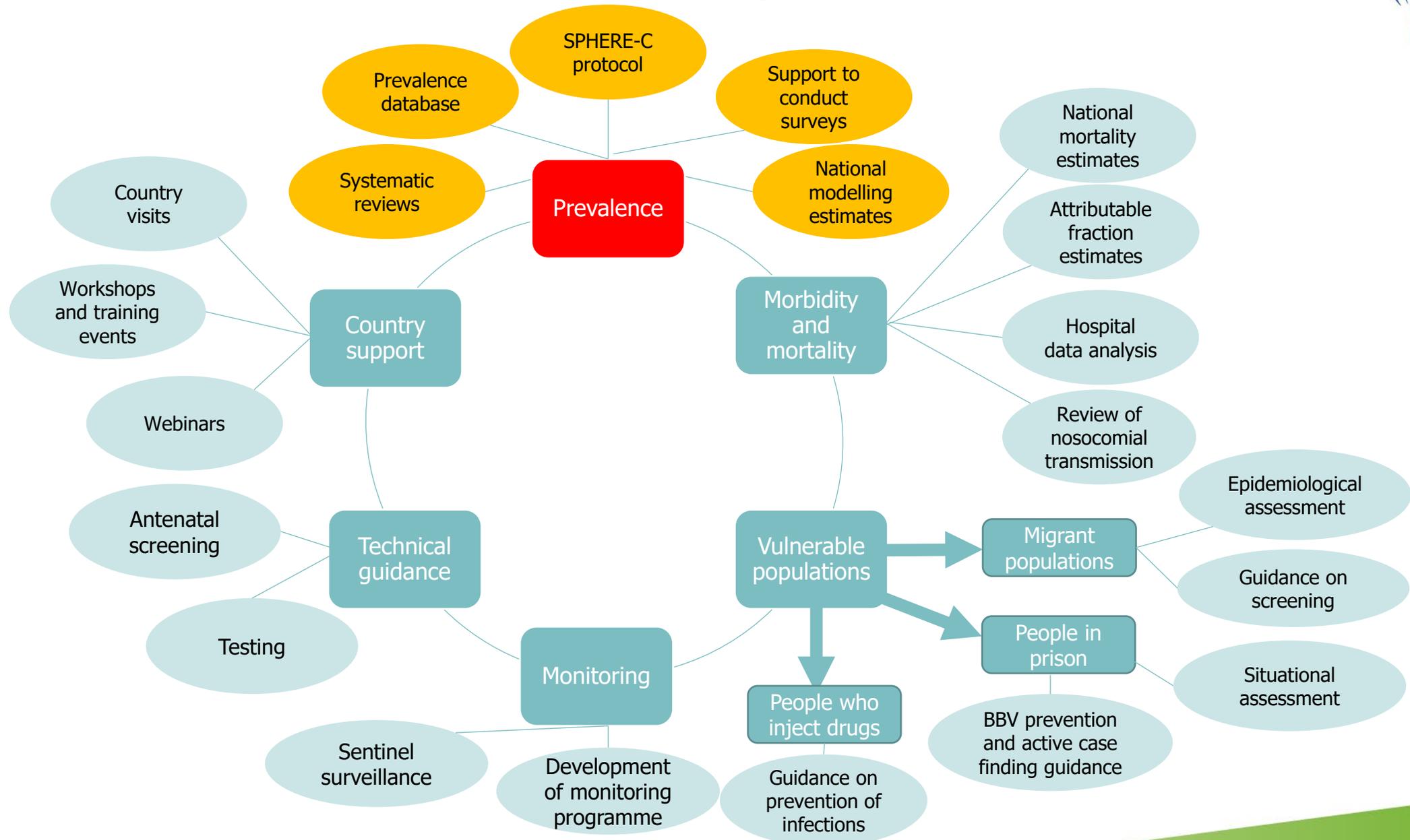
Legend: HBSAg ≥1%, HBSAg <1%

Keywords: epidemiology, Europe, hepatitis C, surveillance.

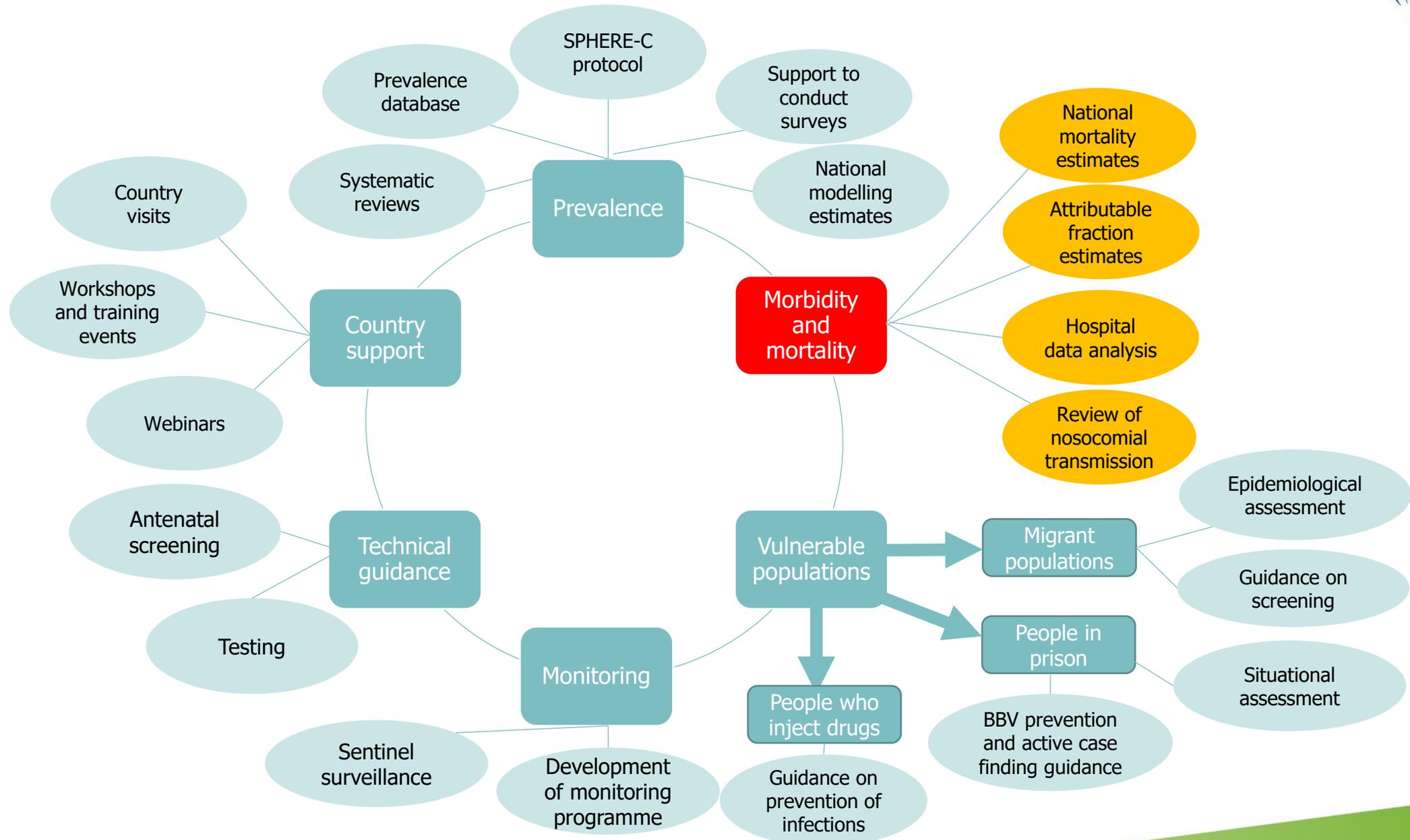
Development of the hepatitis programme of work



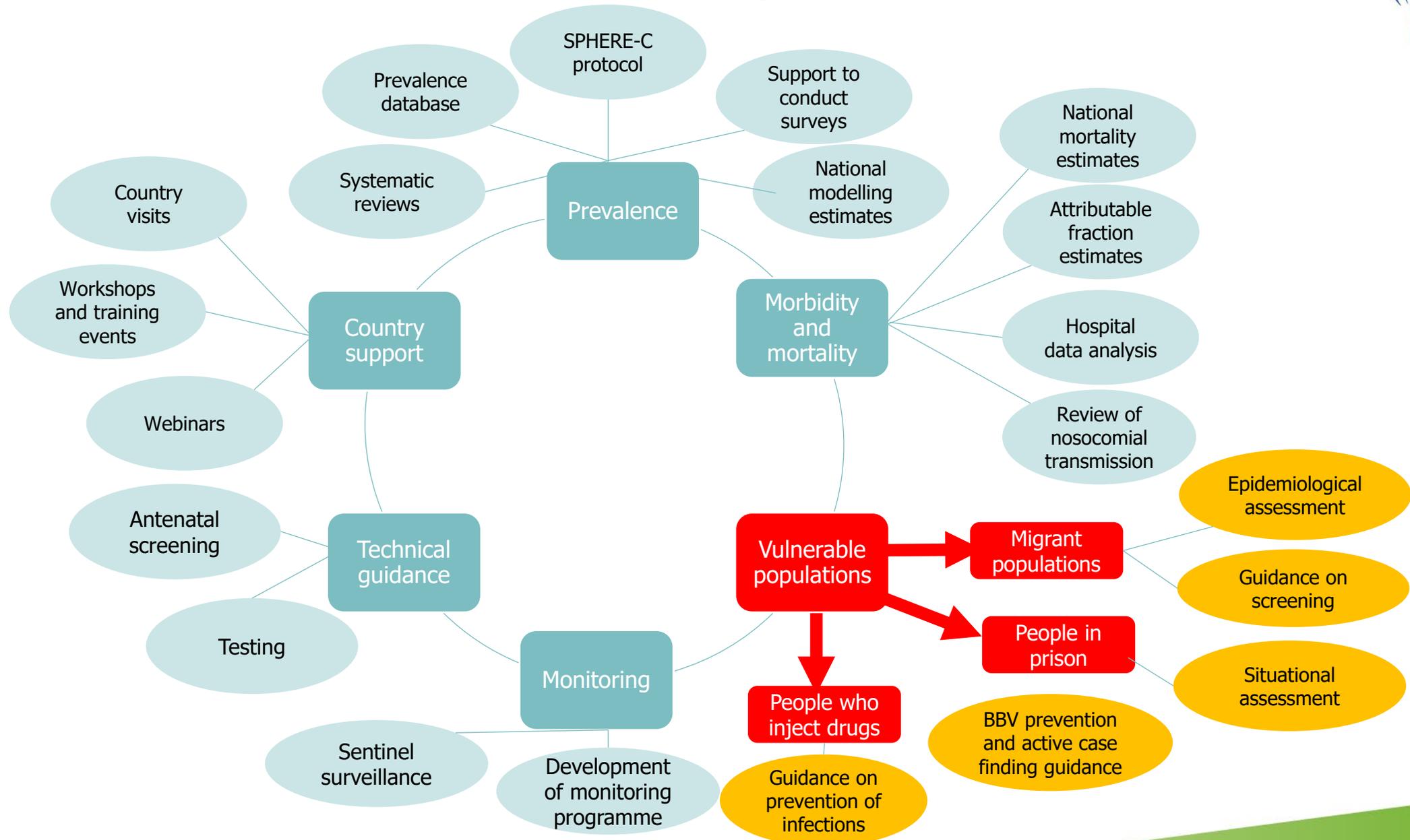
Development of the hepatitis programme of work



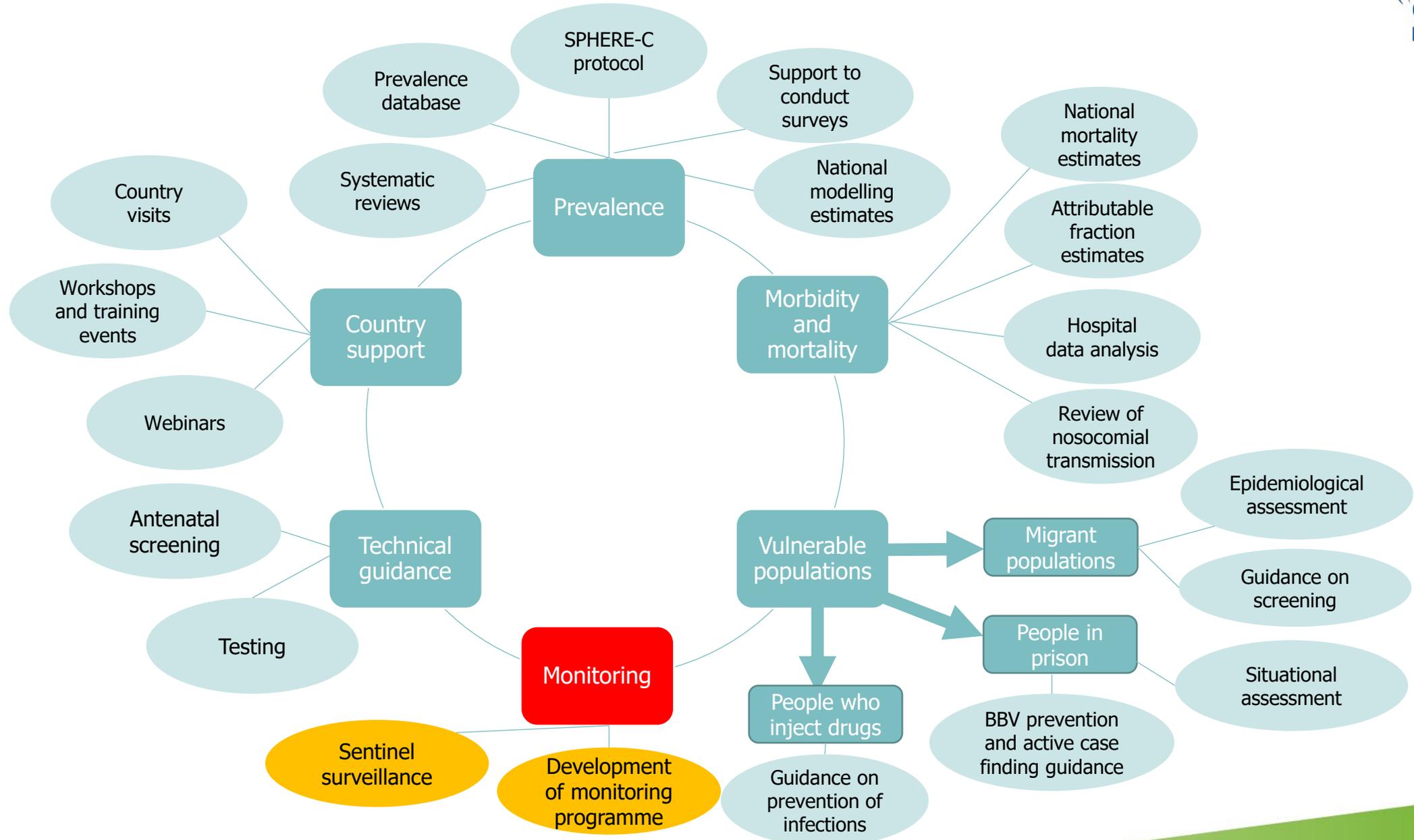
Development of the hepatitis programme of work



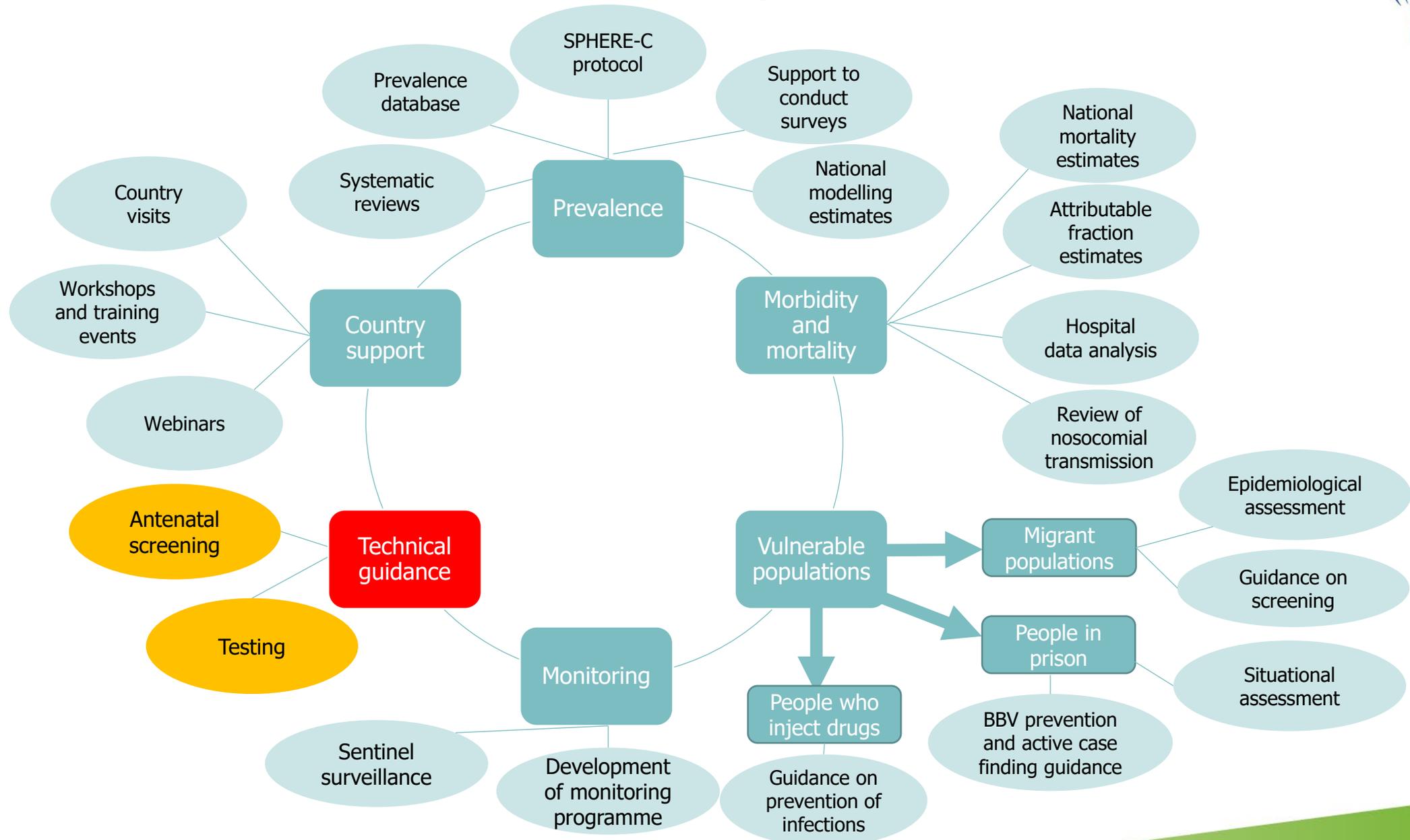
Development of the hepatitis programme of work



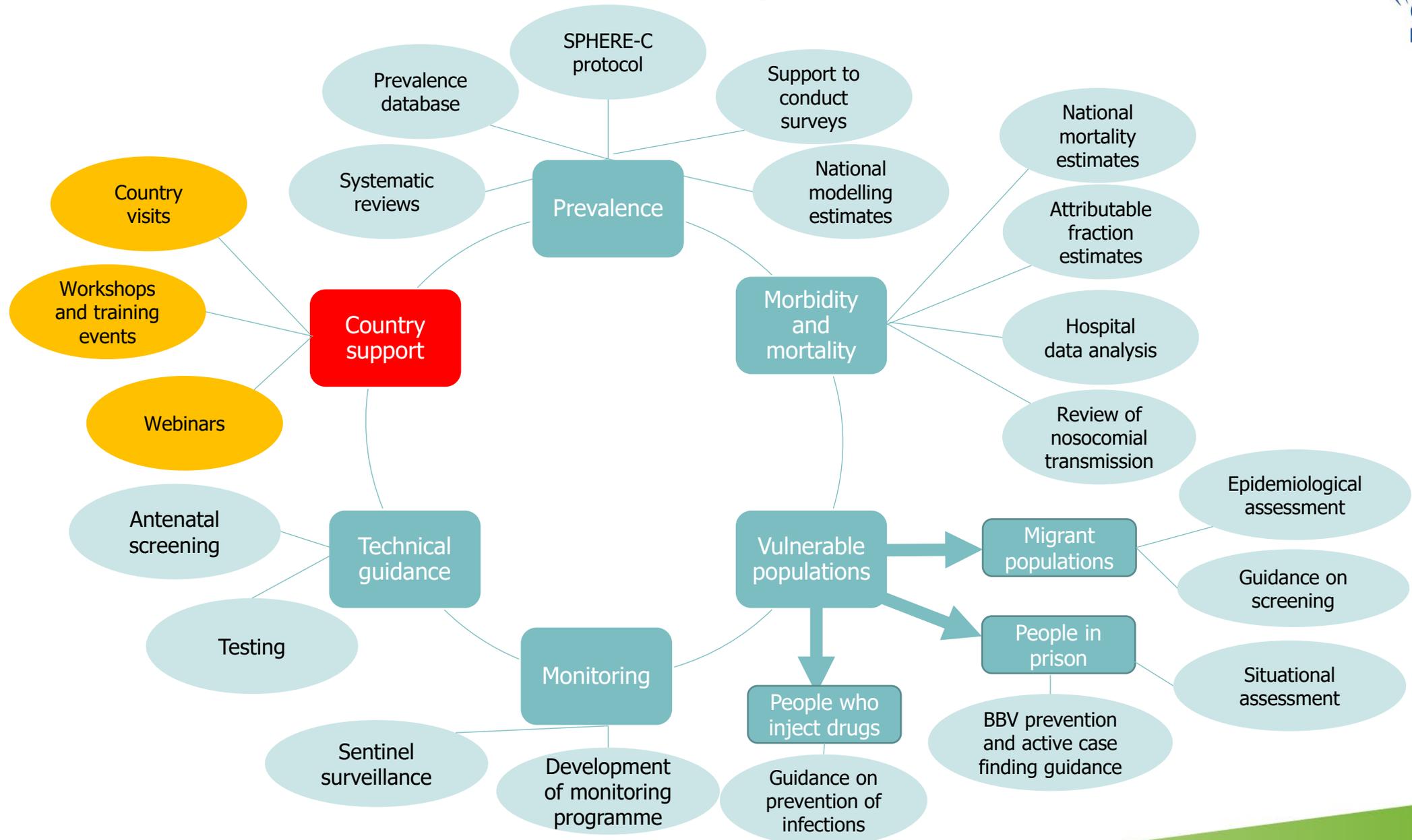
Development of the hepatitis programme of work



Development of the hepatitis programme of work



Development of the hepatitis programme of work



Country support capacity building 2023



Target audience



March 21 15:00-16:00: Webinar on improving testing for HIV and related co-infections in general practice

GPs, nurses



April 12-13, Stockholm: Workshop on increasing the use surveillance and monitoring data for action

CSOs (Greece, Italy, Portugal, Spain)



May 16-17 (two mornings), Online: Training on implementing PrEP operational guidance

Network members



May 31-Jun 1 (two afternoons), Online: Training on implementing antenatal screening for HIV, hepatitis B, syphilis guidance

Network members



June 14 15:00-16:00: Webinar on stigma in general practice: what it is and how it impacts health

GPs, nurses



Autumn: Follow-up on implementing integrated testing roadmaps

Network members



Autumn: Implementing the PWID guidance

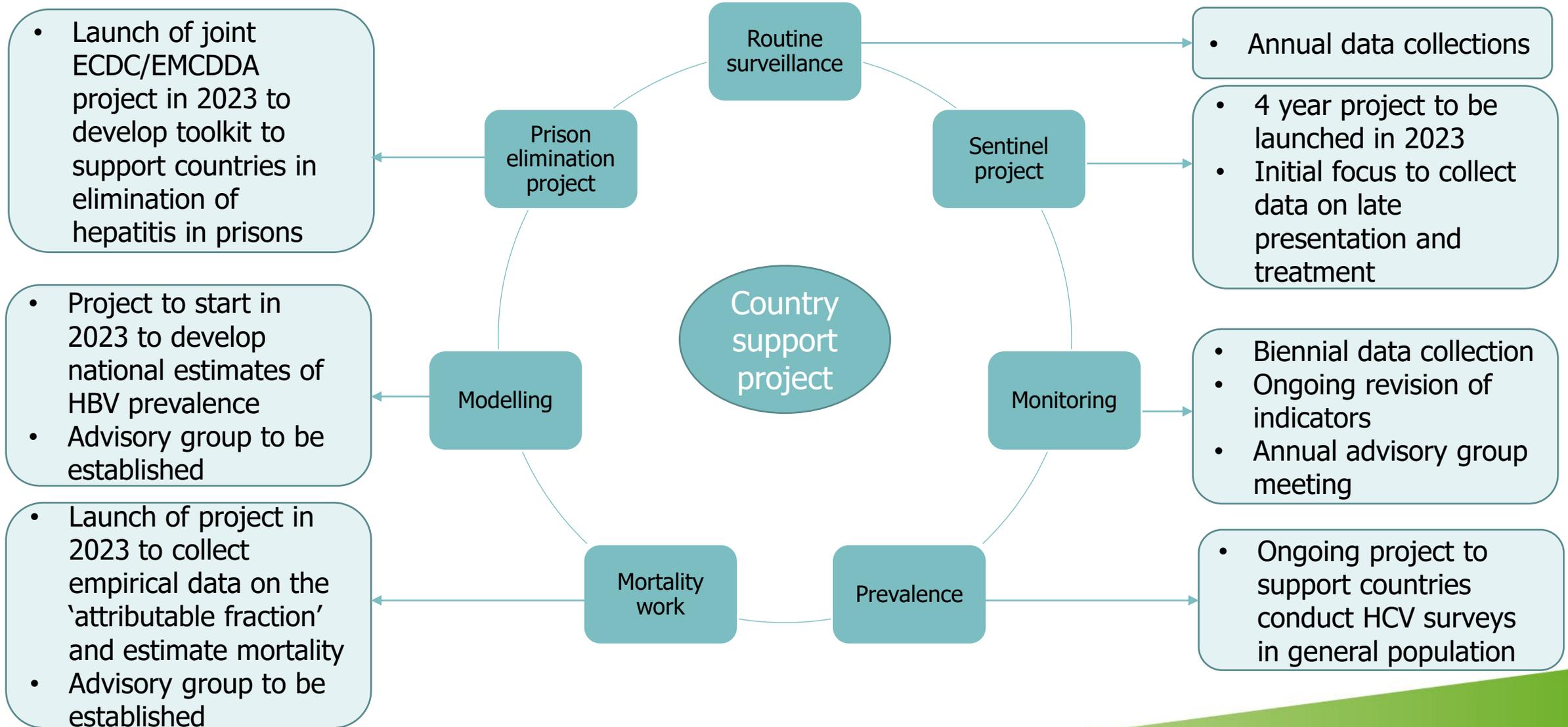
TBD



Autumn: Consultancies/country-to-country exchanges

TBD

Current ECDC hepatitis projects



Challenges for ECDC in supporting countries reach hepatitis elimination targets



- Variation in the support needed by different countries
- Variation in local public health capacity to work on hepatitis
- Large number of diverse issues to be addressed as identified by the network for ECDC
- Limited resources at ECDC (staff and budget)
- Turnover of staff at ECDC
- Competing priorities for ECDC staff
- Competing communicable disease priorities at ECDC
- Maintaining strong collaborations across organisations and ensuring effective synergies