

# ELIMINATE ~~HEPATITIS~~

## Global Health Sector Strategy on Viral Hepatitis: Progress Towards Elimination

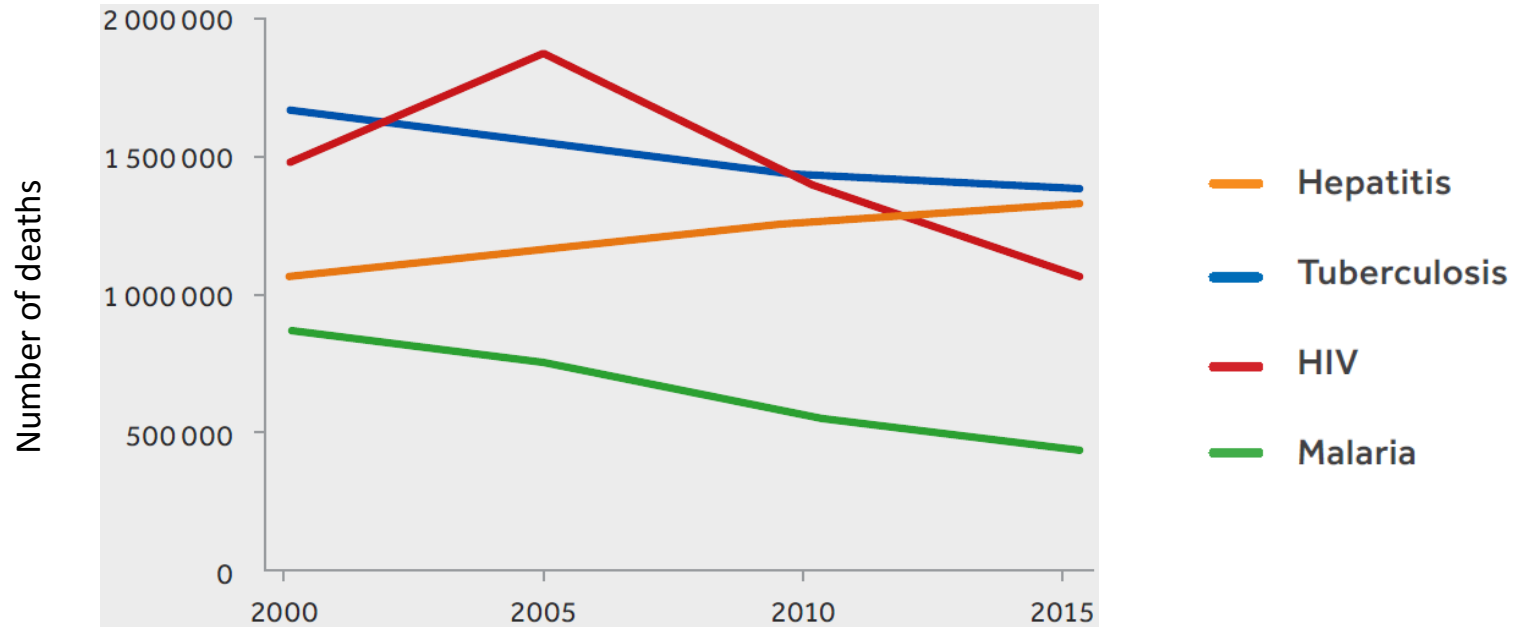
**Dr Antons Mozalevskis**  
**WHO Regional Office for Europe**

VHPB Hungary Country Meeting  
30-31 October 2019, Budapest

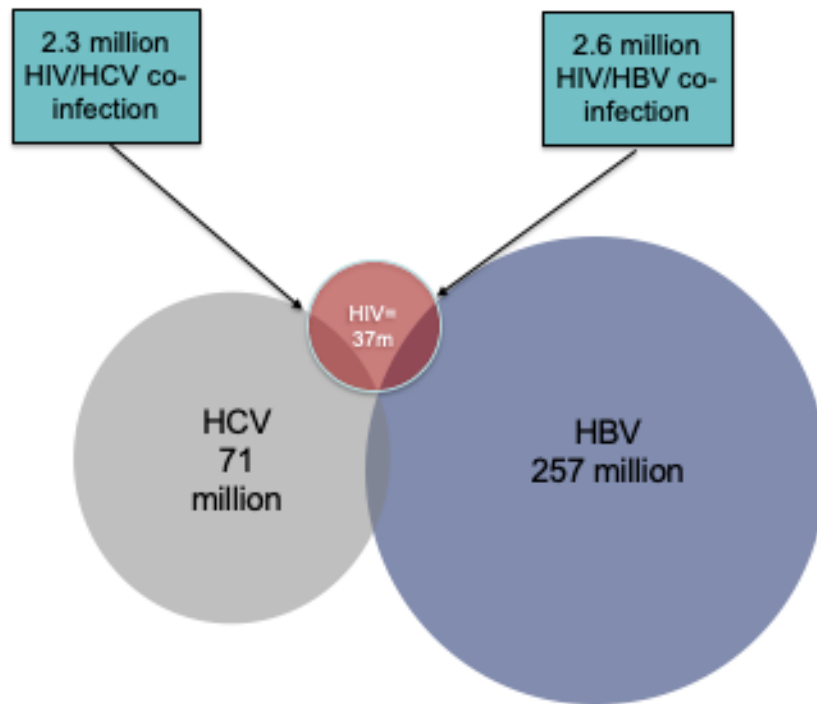


# Deaths on the rise

Estimated global number of deaths due to viral hepatitis, HIV, malaria and TB, 2000-2015



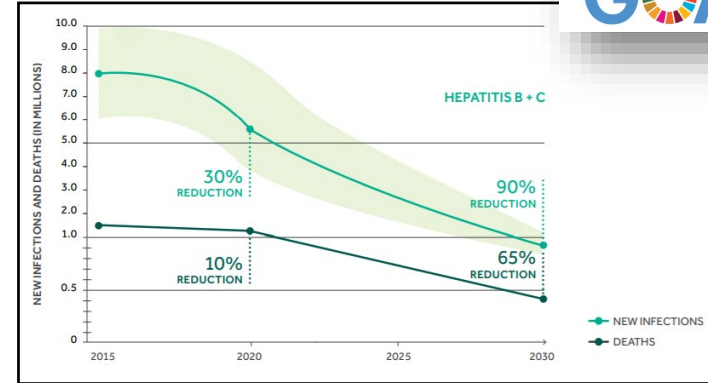
# Intersection of HIV and viral hepatitis



# In 2016, the World Health Assembly endorsed the **elimination** of hepatitis as a public health threat by 2030



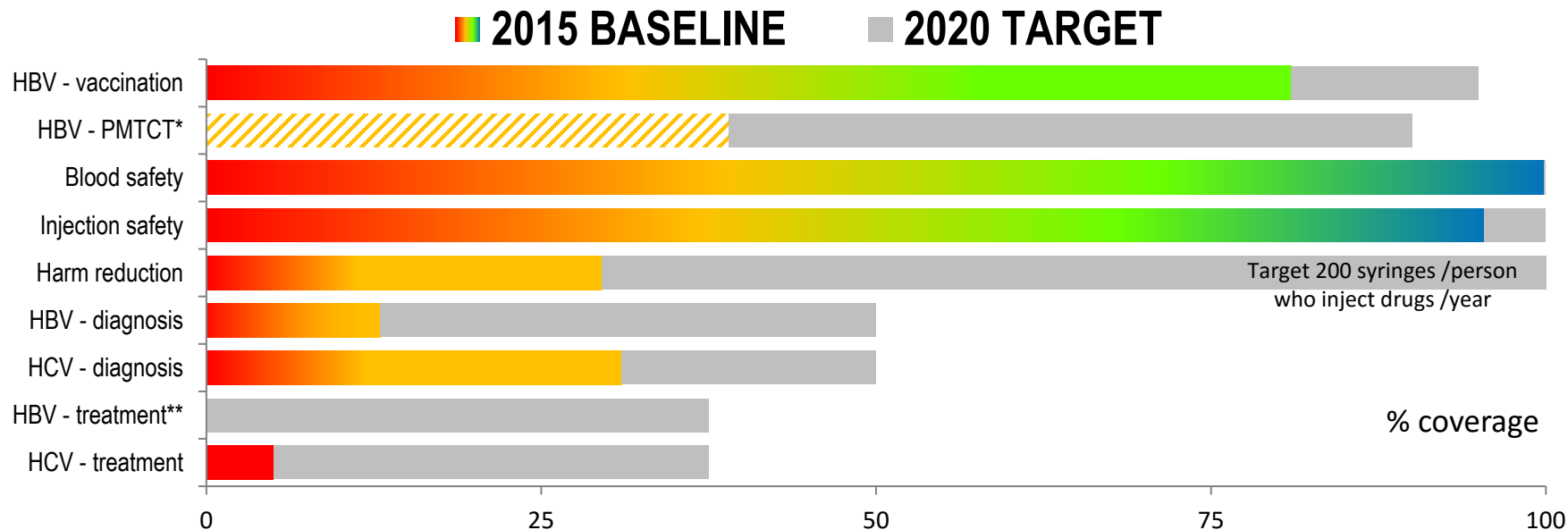
- What does “elimination as a public health threat” mean?
  - Incidence reduced by 90%
  - Mortality reduced by 65%
- What are the implications?
  - Countries formulate plans
  - WHO reports on progress



# Eliminating hepatitis by 2030: A package of interventions with high impact

		2030 targets
Elimination is defined by impact indicators	A. Incidence	-90%
	B. Mortality	-65%
Modelling suggests that taking 5 core interventions to sufficient coverage will achieve impact	1. Three dose hepatitis B vaccine	90%
	2. HBV PMTCT	90%
	3. Blood and injection safety	100 % screened donations
		100% safe injections
	4. Harm reduction	300 injection sets/PWID/year
	5. Testing and treatment	90% diagnosed
		80% eligible treated

# 5 regional essential targets on track by 2020

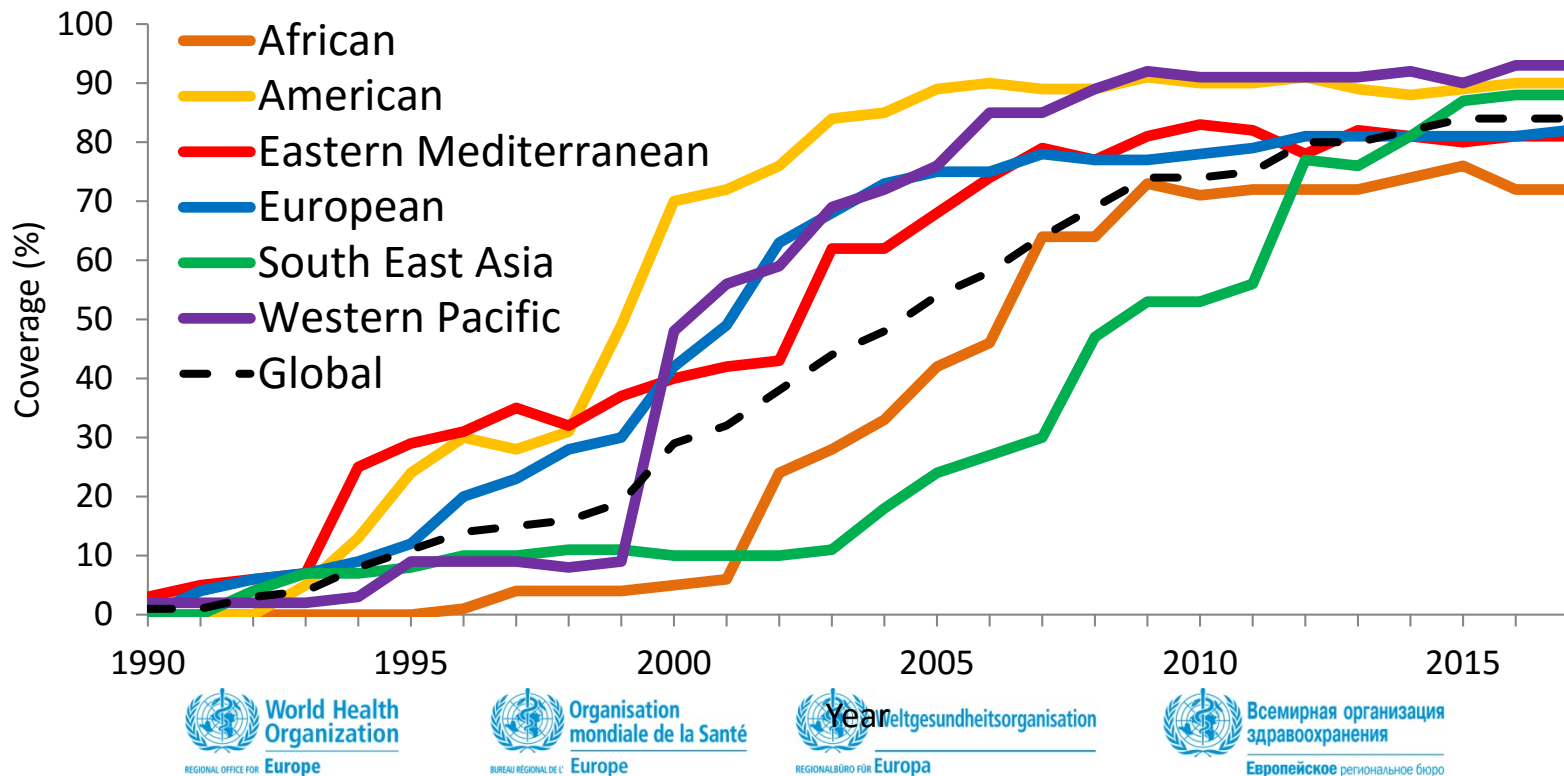


\*Measuring the progress on vertical transmission prevention is limited by data on pregnant women screening coverage

\*\* Measuring the progress on HBV treatment is now limited by the absence of data on the proportion of persons eligible

# 3-dose hepatitis B vaccine: 84% coverage in 2017

WHO/ UNICEF Joint Reporting Form



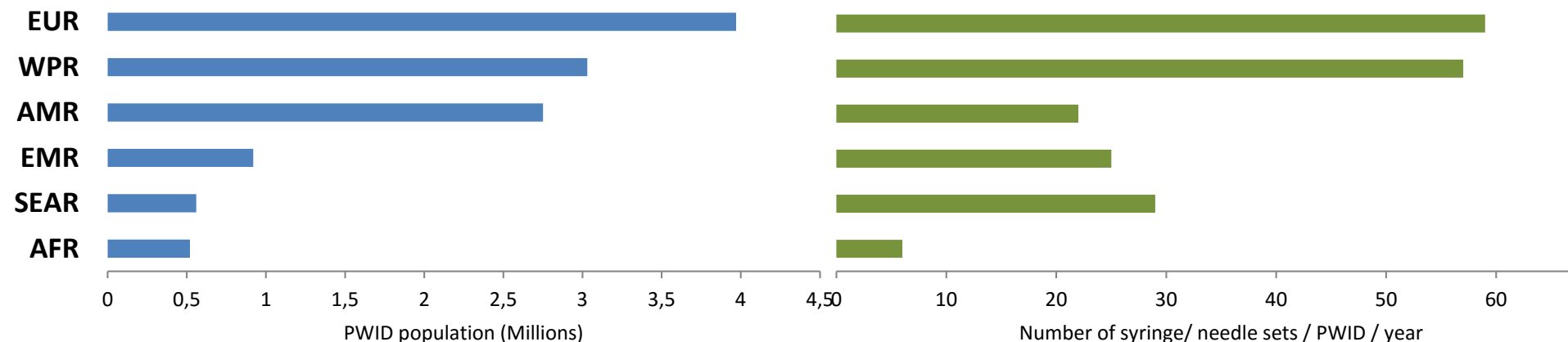
Source: WHO AND UNICEF

# Harm reduction– needle syringe distribution

## Global AIDS Monitoring

11.8 million PWIDs\* worldwide

27 needle and syringes / PWID\* / year



EUR: European Region, WPR: Western Pacific Region, AMR: American Region,  
EMR: Eastern Mediterranean Region, SEAR: South East Asia Region, AFR: African Region

\*PWID: Person who injects drugs



Source: UNODC, UNAIDS, WHO



# Where are we now?

## HCV Cascade by WHO region by 2020-2030 targets

**Target:**  
**90% diagnosed**  
**80% treated**

2014: < 200 000

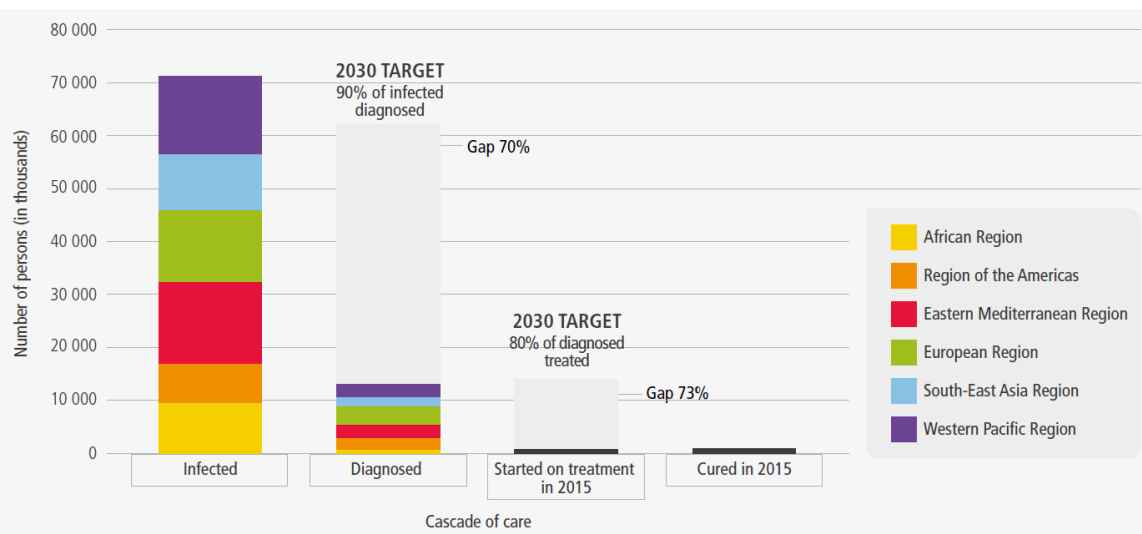
2015: 1.1 million

2016: 1.7 million

2017: 2.1 million

**Dec 2017: ~5 million treated with DAA**

Most in ~10 "champion" countries



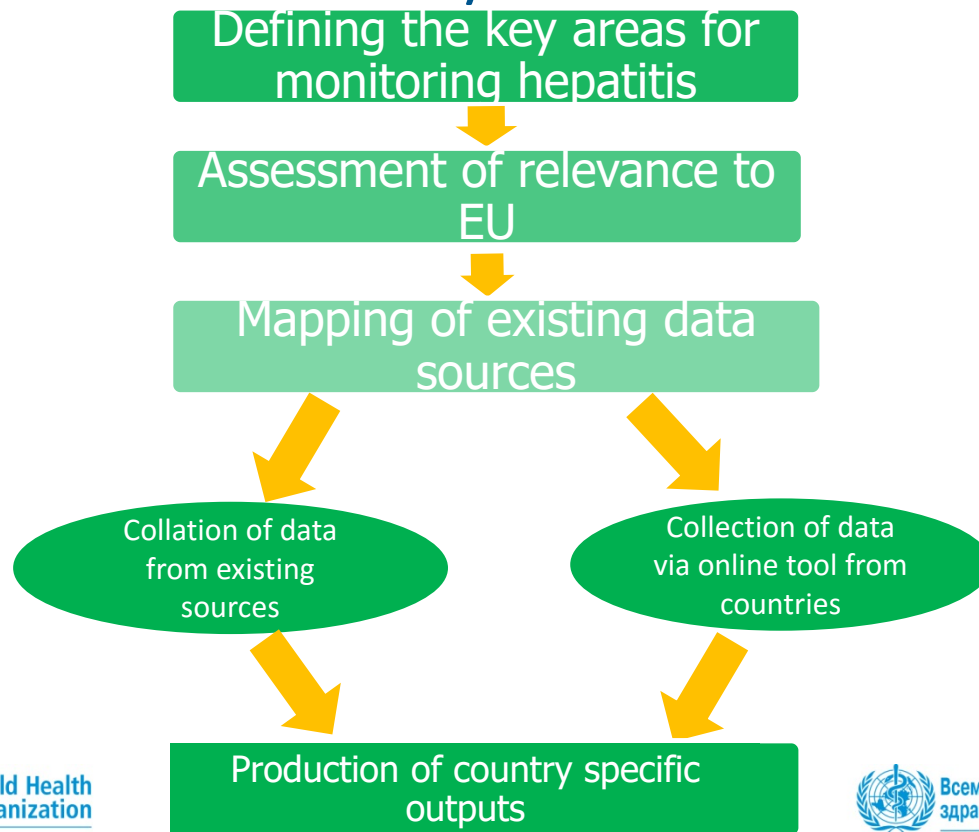
**Little disaggregated data reported for PWID and people in prisons**

# HCV treatment among PWID – main barriers

- **System level**
  - exclusion of PWID in treatment guidelines and national plans
  - treatment conducted in tertiary centers; not adapted care facilities for PWID
  - lack of Harm Reduction platforms
- **Provider level**
  - concerns about adherence issues
  - concerns about reinfection
  - concerns about side effects and drug-drug interactions during treatment
  - reluctance to treat active drug users
- **Criminalization of drug use**

*(Marieta Simonova, EASL 2016)*  
*(Wolfe et al. IJDP 2015)*

# The development of a system for monitoring hepatitis at the EU/EEA level

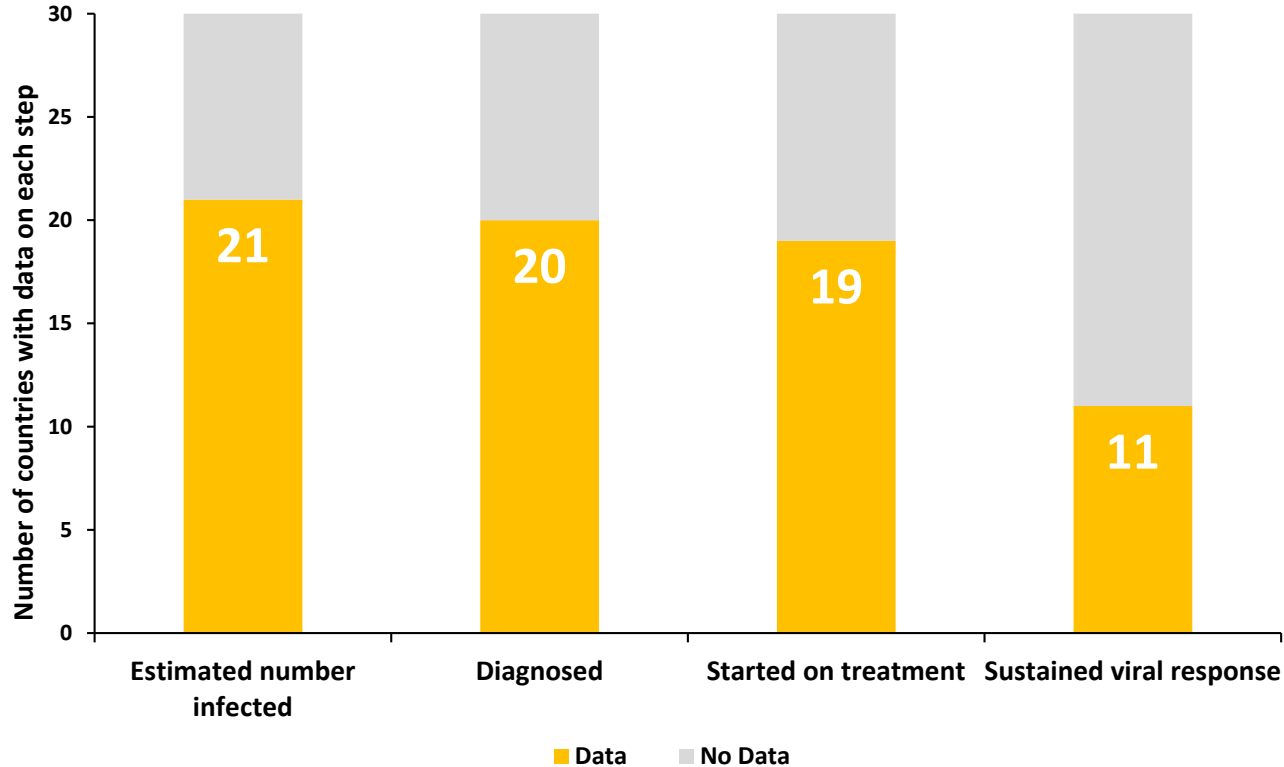


# EU/EEA countries responding to hepatitis data call 2019

(31/31=100%)



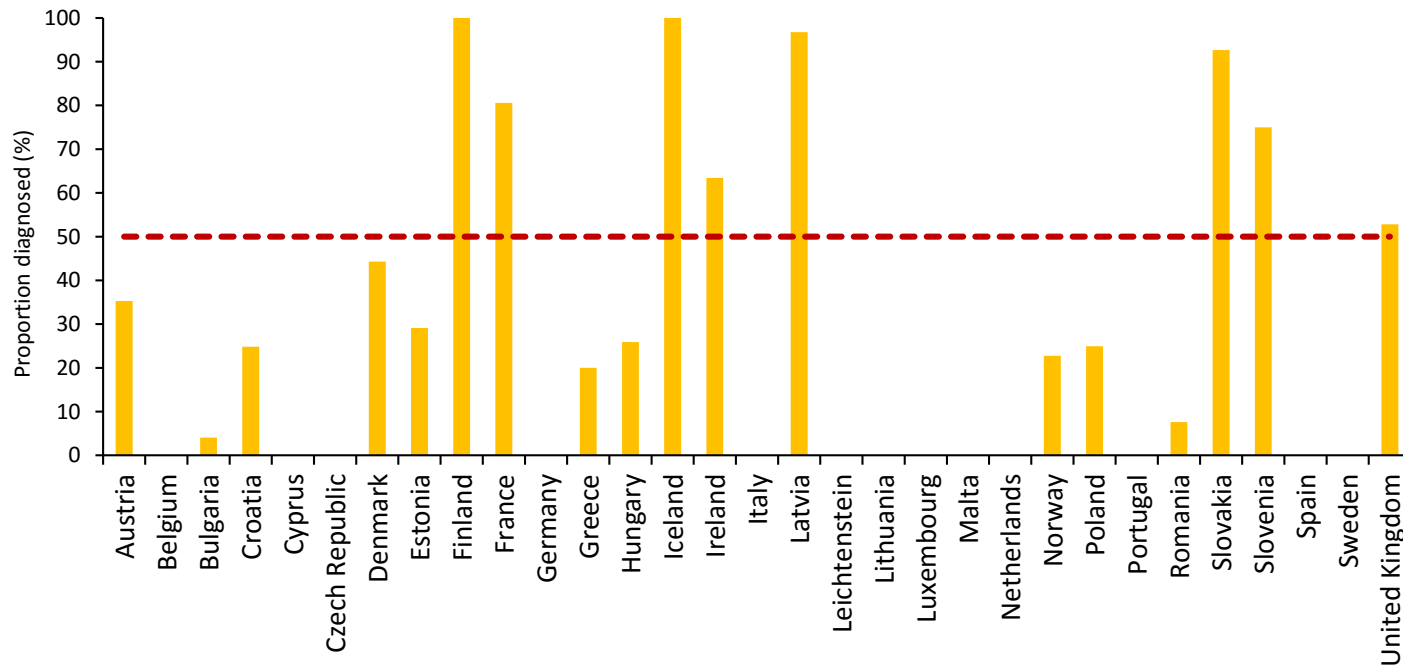
# Number of countries reporting data for each stage of the continuum of care for hepatitis C



Hepatitis C



# Proportion of people living with HCV who have been diagnosed



EU/EEA average 28%

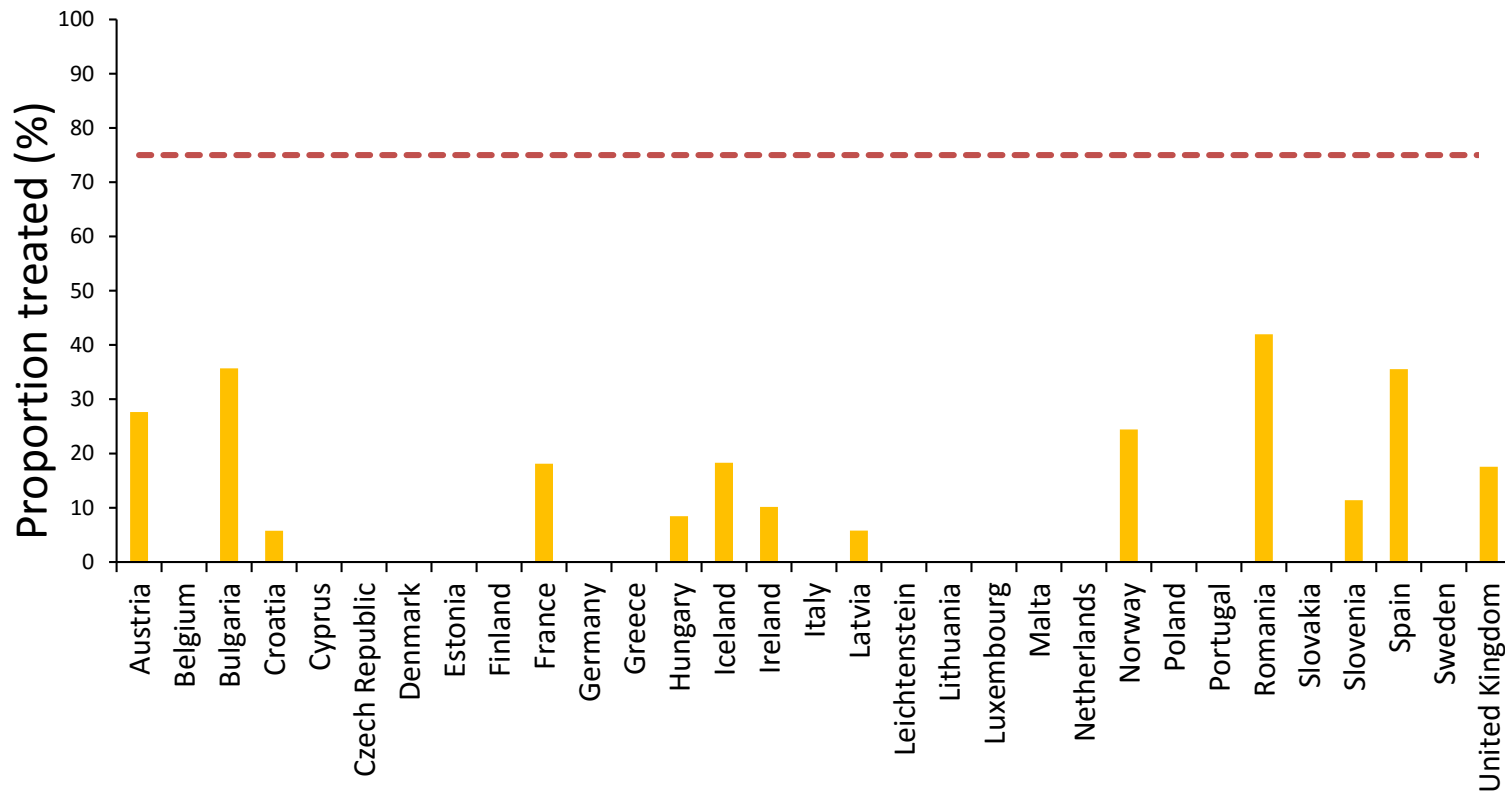
2020 target 50%

# Proportion of people diagnosed with HCV who have been started on treatment

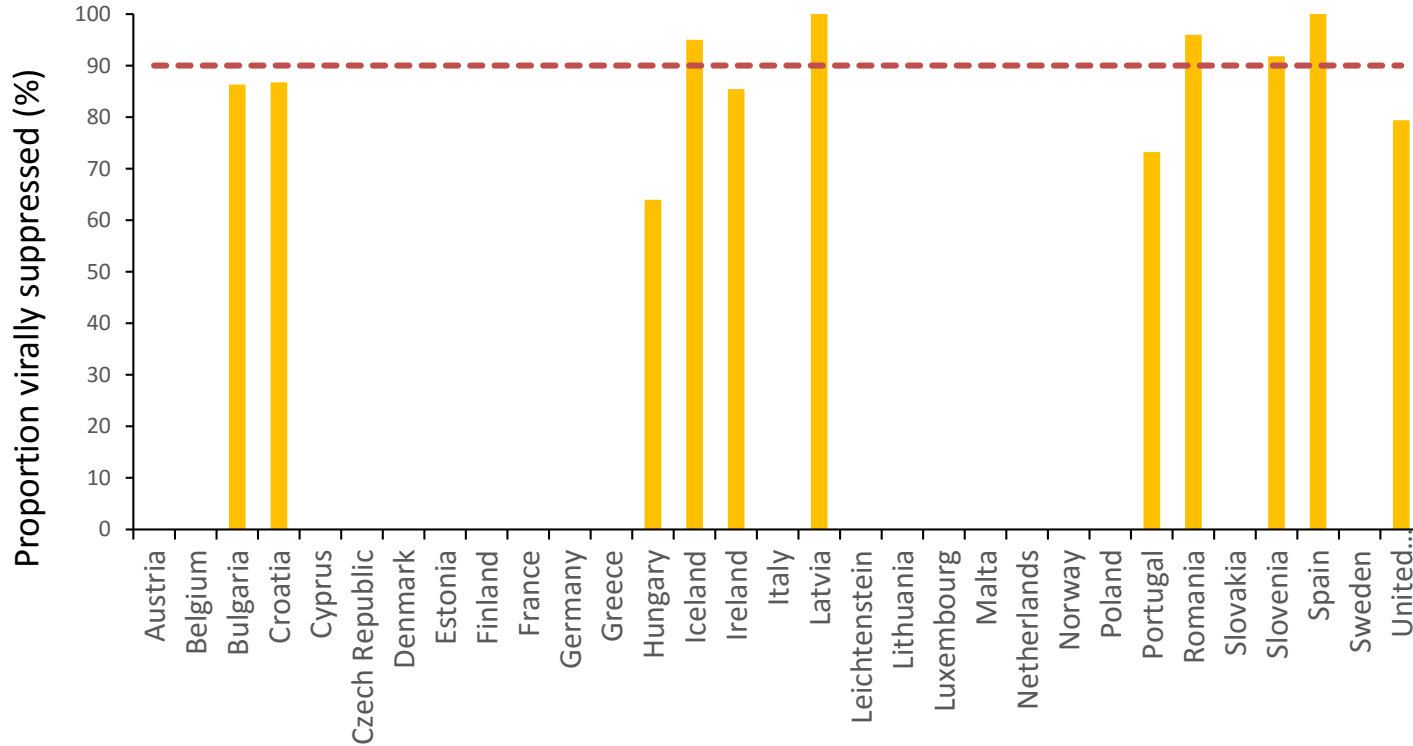


**Regional average**  
**24%**

**2020 target**  
**75%**



# Proportion of patients on treatment for HCV with SVR



2020 target 90%



# Towards stronger national plans

Global Health Sector Strategy

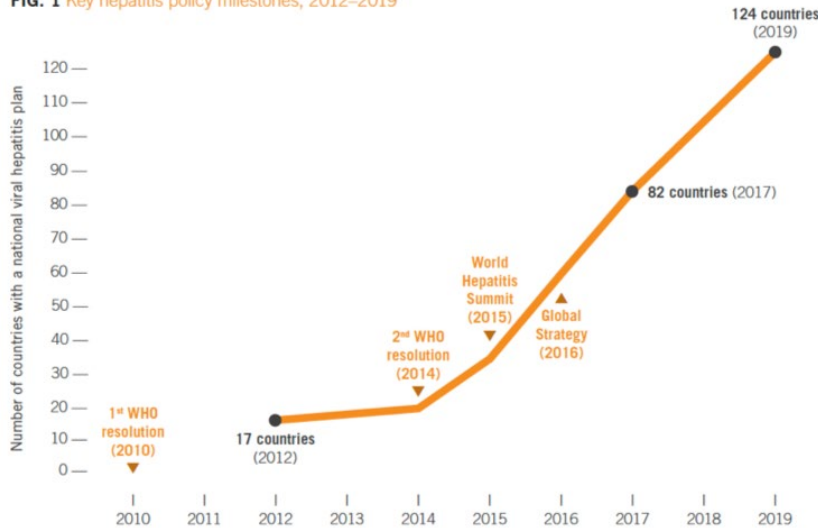
Regional Action Framework

National Strategies or Plans

# National Plans for Viral Hepatitis growing globally...

## Number of countries with a viral hepatitis plan, 2012-2019

FIG. 1 Key hepatitis policy milestones, 2012–2019



- 17 countries had national plan in 2012
- 124 countries have a national plan in 2019

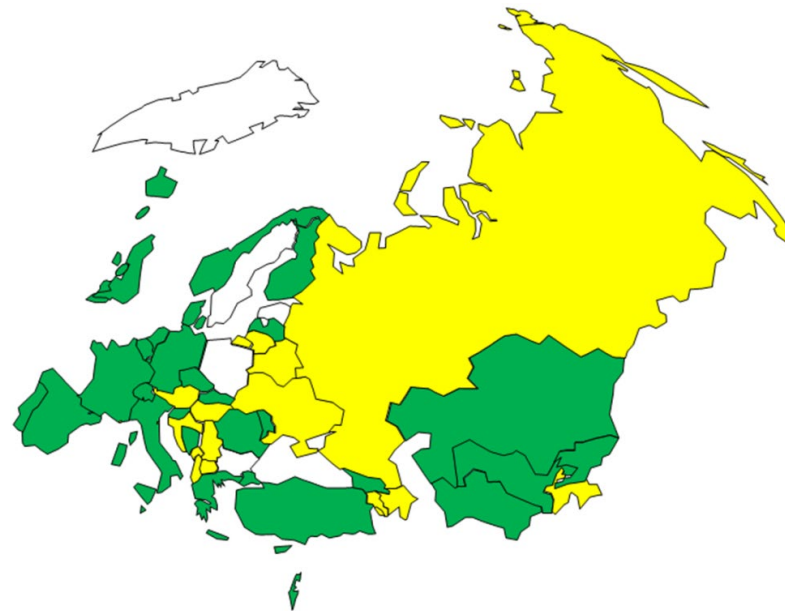
# ...and regionally

The number of countries in the European Region with **national hepatitis plans** increased from

13 (in 2013)



32 (in 2019)



- Endorsed hepatitis action plans (32 countries)
- Developing hepatitis action plans (15 countries)



**First Regional Consultation on Viral Hepatitis in the WHO European Region: Progress on the Way to Elimination  
Tbilisi, Georgia 11–13 February 2019**



# Compendium of Best Practices 1

***Over 35 best practices submitted by 18 Member States***

*Government, academia, NGOs*

**1<sup>st</sup> call:** July – August 2019

**2<sup>nd</sup> call:** October 2019

**Publishing date:** 2019!

**Collaboration with WHO CO**

**WHO CC and partners**

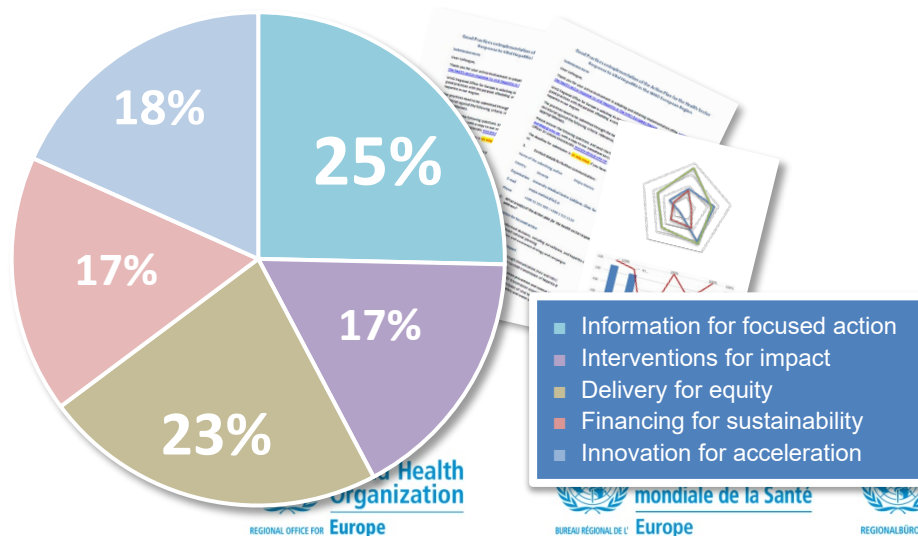
## **Criteria:**

- Relevance
- Sustainability
- Efficiency
- Ethical appropriateness

# Compendium of Best Practices 2

## ***Balanced coverage of Strategic Directions***

*Self-reporting questionnaire and technical review WHO/EURO*



### **Topics:**

- Elimination of HCV in PLWH, PIP
- Test and treat for MSM
- Integrated models of care
- Mobile testing units
- Access to medicines

# SD1 - Information for focused action

## Germany: systematic review

- Robert Koch Institute
- **Integrative review** of epidemiological evidence on viral hepatitis among different population groups
- Knowledge gaps in incidence and prevalence, migrants, MSM, PWID, PIP...

## Spain: national serosurvey

- Ministerio de Sanidad, Consumo y Bienestar Social
- 17,496 people; 9,103 participants
- **No hepatitis C among people <20 yrs**
- Prevalence: **0.69%**
- Males, 50-59 yrs, social determinants of health



# SD2 – Interventions for impact

## Austria: HCV/HIV clinic

- Medical University of Vienna
- Klinikum Klagenfurt am Woerthersee
- Difficult follow-up of HCV/HIV co-infection
- Policy for reimbursement of DAAs
- Established a **dedicated outpatient clinic** for HCV/HIV co-infection with multidisciplinary approach
- **High acceptance and increased uptake of hepatitis C treatments for PLWH**

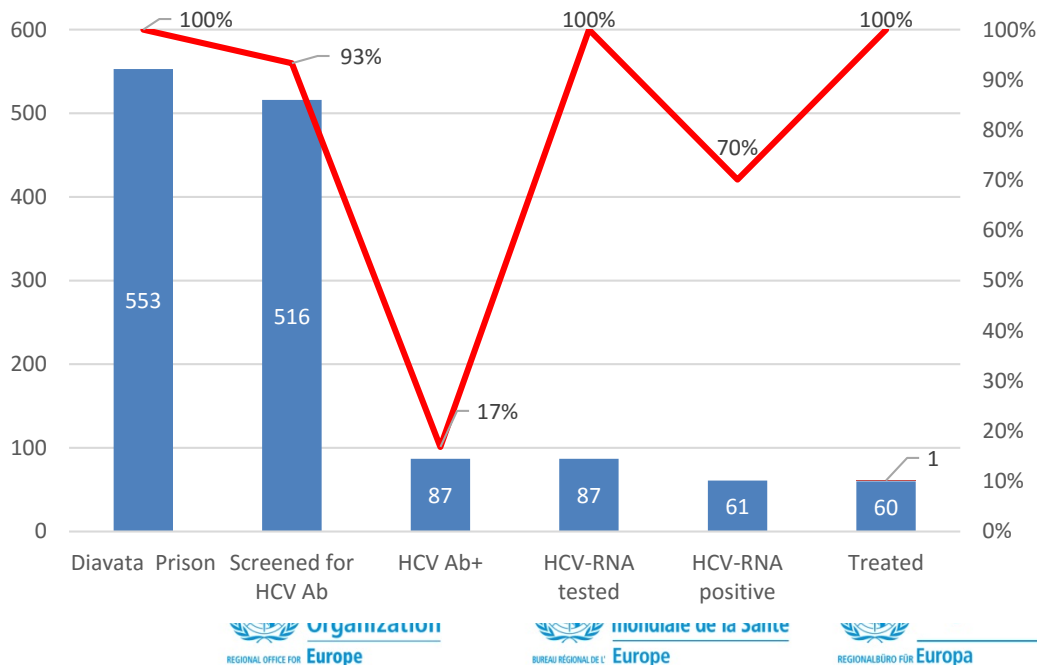
## Georgia: hepatitis tests in PHC

- National Centre for Disease Control and Public Health
- High burden for hepatitis C, tuberculosis and HCV/TB co-infection
- Established **integrated HIV/viral hepatitis/TB testing in PHC**
- Increased **testing** by ~50%
- Increased **reporting** of HIV, HCV and TB



# SD3 - Delivering for equity

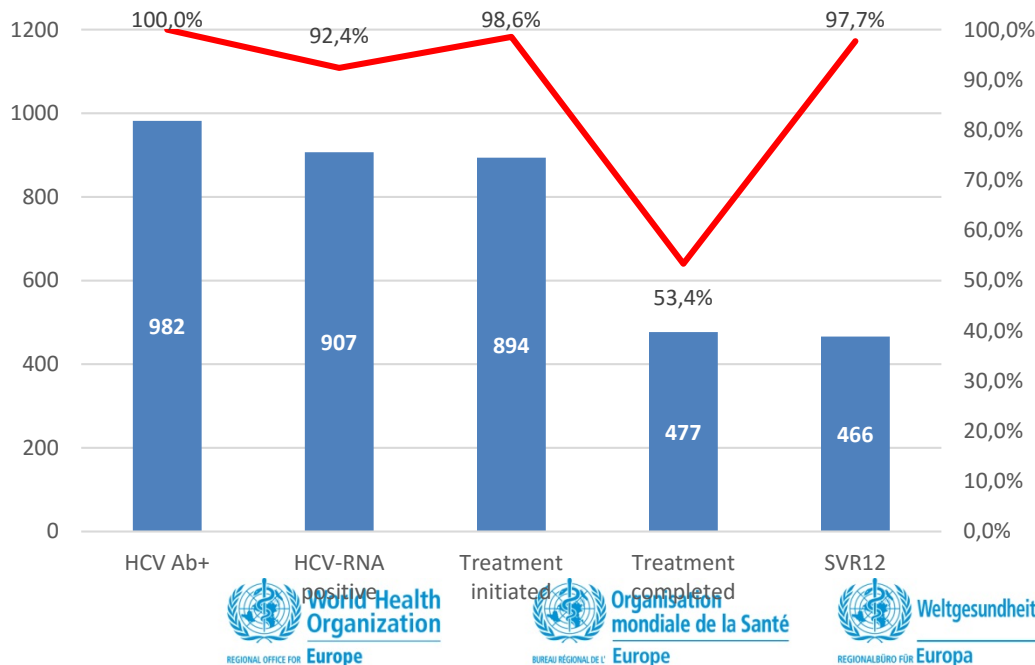
## Greece: people in prisons (PIP)



- Hellenic Liver Patients Association (HLPa)
- Diavata Prison and hepatology clinics
- Test and treatment for PIP
- Nearly full coverage for testing
- Full coverage for treatment
- Project will be extended to three other prisons in Greece

# SD4 - Financing for sustainability

## Ukraine: access to generic DAAs



- Médecins Sans Frontières (MSF)

- Generic DAAs distributed to PLWH and OST clients in secondary health care

- SVR12 = 97.4%

- Public Health Centre, UNDP

- Procurement of DAAs

- Generic SOF/DAC: 89 USD

- Generic SOF/VEL: 250 USD

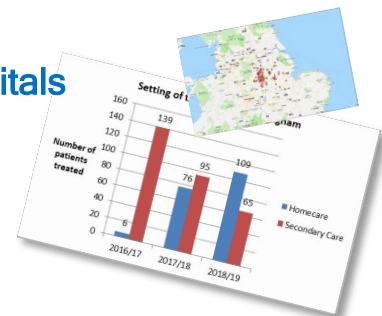
# SD5 – Innovation for acceleration

## Croatia: mobile apps

- Ministry of Health
- City of Zagreb
- CheckPoint Zagreb
- Insufficient financial and operative means
- Free informative tool developed
- Prevention, symptoms, testing and treatment
- Downloads/Visits: 30,374 times

## United Kingdom: homecare

- Nottingham University Hospitals
- Needs for hospital clinics(?)
- Geographic inequalities(!)
- More patients treated, smaller waiting lists
- Improved outreach and great feedback
- Decrease of patients in secondary care from 70% to 24% in three years



# Next steps

- WHO working towards global reporting on hepatitis
  - New system to monitor the cascade and other pieces missing:
    - Policy uptake
    - Cascade of care and cure
    - Sequelae
  - Close collaboration with ECDC to avoid double reporting from MS
- Progress report on implementation of the Action plan for the health sector response to viral hepatitis in the WHO European Region:
  - <http://www.euro.who.int/en/about-us/governance/regional-committee-for-europe/69th-session/documentation/working-documents/eurrc698b-progress-report-on-implementation-of-the-action-plan-for-the-health-sector-response-to-viral-hepatitis-in-the-who-european-region>
- Compendium on good practices in hepatitis response (by the end of 2019)

## Acknowledgments

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and Massimo Colombo

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<http://www.who.int/hepatitis/en/>

**Thank you!**  
**Köszönöm!**