

INTERNATIONAL VHBP ROUNDTABLE
**PREVENTION AND CONTROL OF VIRAL HEPATITIS IN THE RUSSIAN FEDERATION:
LESSONS LEARNT AND THE WAY FORWARD**

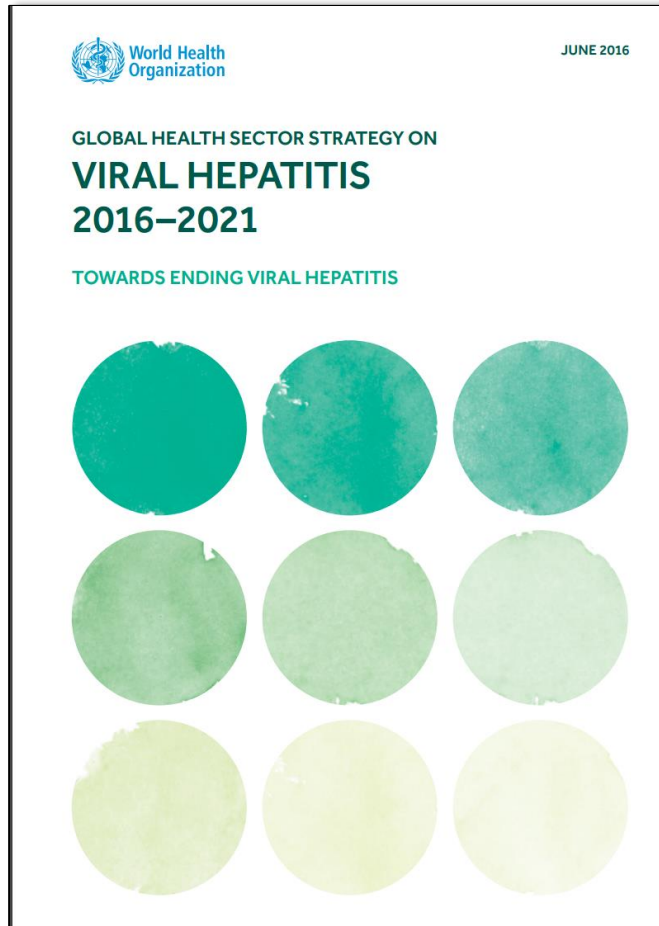
Development of the legal framework for viral hepatitis control in the Russian Federation

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WHO Global Strategy



VISION

A world where viral hepatitis transmission is halted and everyone living with viral hepatitis has access to safe, affordable and effective prevention, care and treatment services.

GOAL

Eliminate viral hepatitis as a major public health threat by 2030.

2030 TARGETS

Between 6 and 10 million infections are reduced to less than 1 million by 2030; 1.4 million deaths reduced to less than 500 000 by 2030.

FRAMEWORKS FOR ACTION

Universal health coverage, the continuum of services; and, a public health approach.

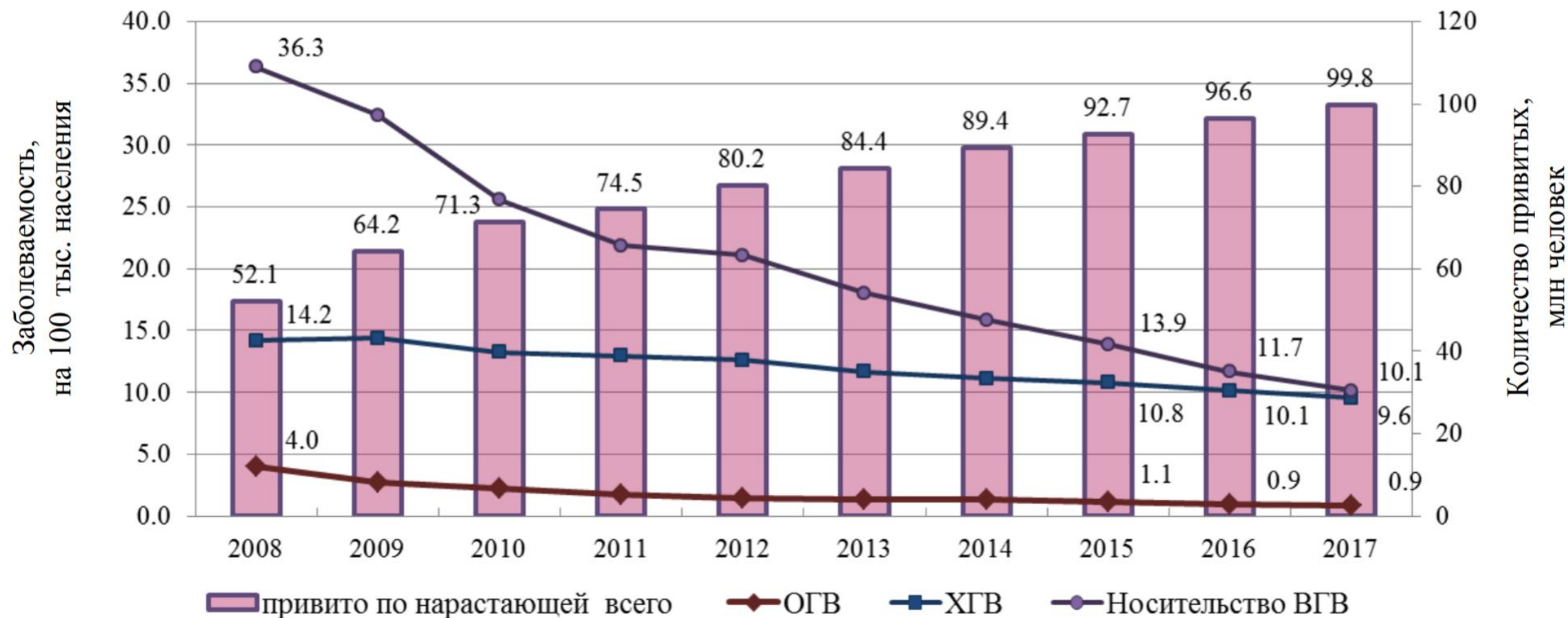
Regulatory Framework

- **Constitution of the Russian Federation**
- **Federal Law 323-FZ of 21.11.2011: Health Protection Basics in RF**
- **FL 326-FZ of 29.11.2010: Mandatory Health Insurance in RF**
- **FL 178-FZ of 17.07.1999: Social Services in RF**
- **FL 157-FZ of 17.09.1998: Communicable Disease Immunoprophylaxis.**
- **Decree 175 of December 1, 2004 by Government RF: Approval of the Lists of Socially Significant and Notifiable Diseases**
- **Decree 1492 of December 8, 2017 by Government RF: Government Commitments Programme on Health Care Benefits in 2018 and for the 2019-2020 Plans.**
- **Decree 1512 of December 28, 2016 by Government RF: Approval of the Provisions on ARV Drug Supply to HIV-Positive Persons, including HBV/HCV-infected, and the Provisions on the Supply of Antibiotics and Anti-TB Drugs to MDR TB Persons.**
- **MH RF Decree 125n of 21.03.2014: Approval of the National Immunization Calendar and the IC for epidemiological indications.**
- **Local Regulations of Regions RF.**

Current Legislation Benefits

- **HBV immunization;**
- **HAV immunization for epidemiological indications;**
- **Screening for HV;**
- **HIV/HV comorbidity treatment.**

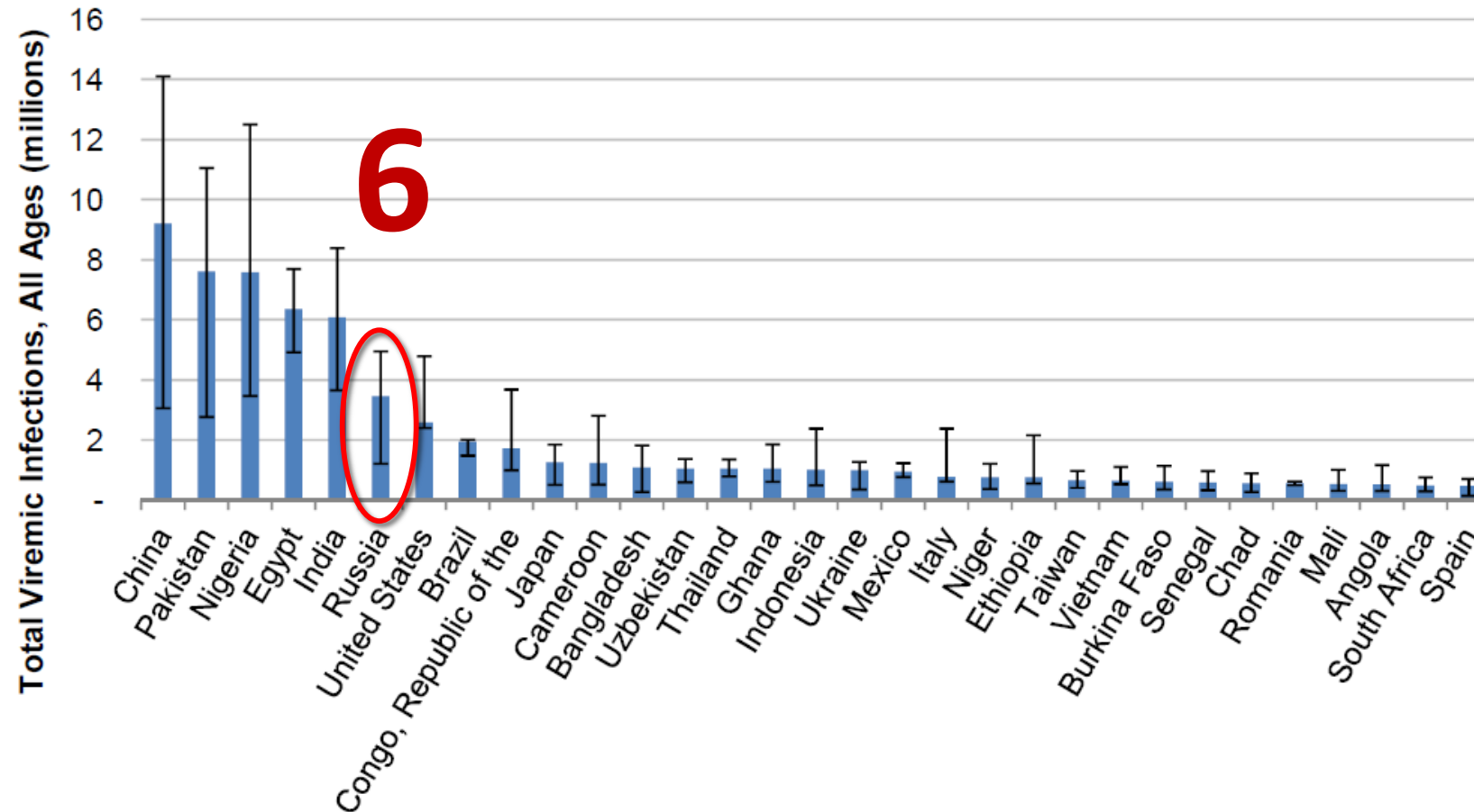
Acute HBV, Chronic HBV and HBV Carriage/100 000 and n Immunized in Ascending Order, MM



Acute and Chronic Hepatitis C Incidence/100 000

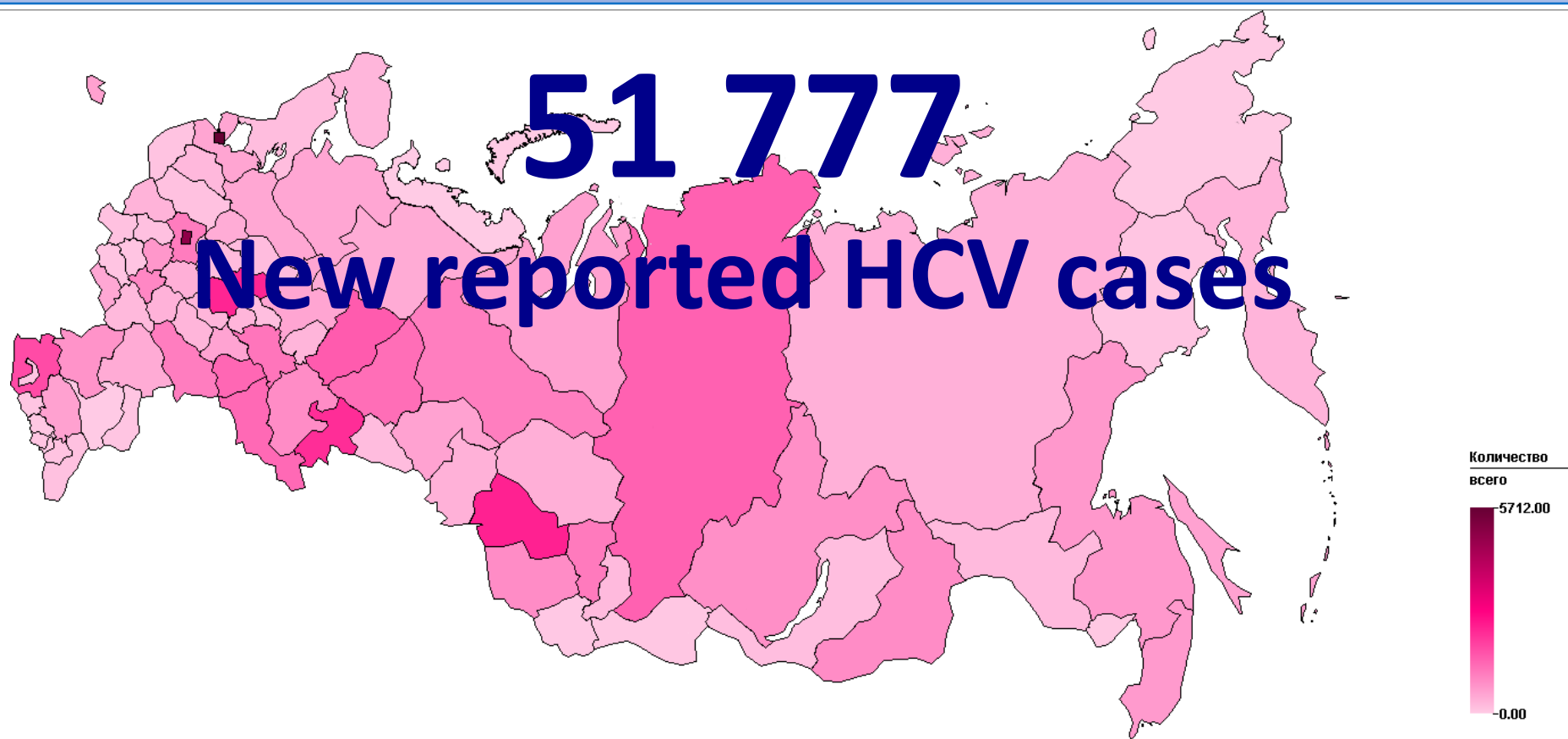


Total HCV Patients: Country Rating (80% of total global)



Gower, E., Estes C., Hindman, S., Razavi-Shearer, K., Razavi, H., Global epidemiology and genotype distribution of the hepatitis C virus, *Journal of Hepatology* (2014)

Chronic HCV Incidence in RF Regions, 2017 (absolute value)



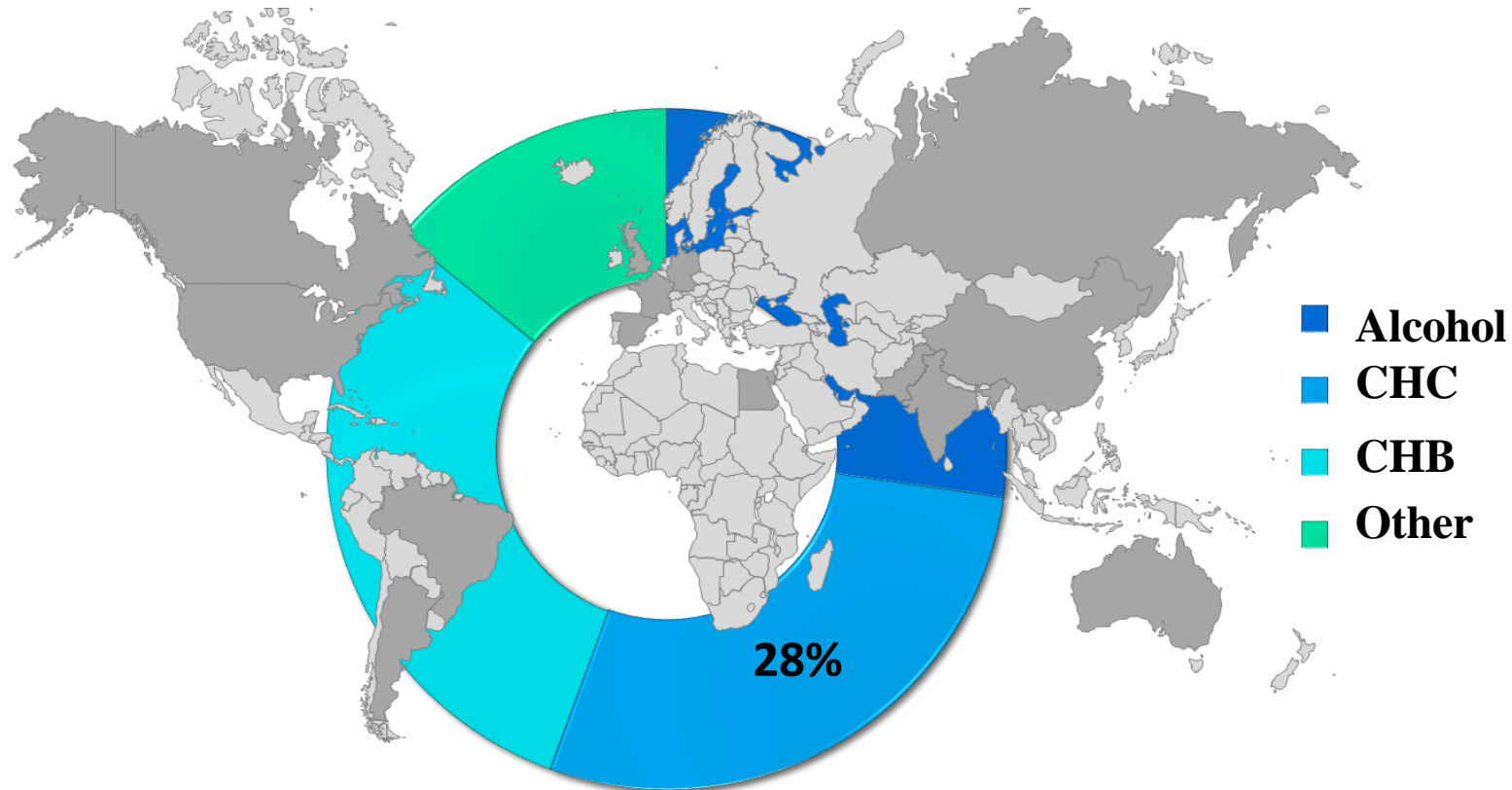
Reference Center for Viral Hepatitis of Rospotrebnadzor

HCV Infection (cases)

- 20% spontaneous recovery
- 75-85% infection chronization
- 5-20% liver cirrhosis
- Average LC development period: 20 years
- **5-20% LC patients develop HCC**

28% LC deaths are due to HCV

Causes of LC-related deaths



ChHVs cause circa 1.3 MM deaths annually to compare with HIV/AIDS/TB or malaria burden.

Cowie and MacLachlan. AASLD 2013. Abstract 23.

Improving Regulatory Framework

Draft Federal Law: «On
BioSecurity»

Legal grounds

Draft Federal Law: «**On
prevention of viral hepatitis
spreading in the Russian
Federation**»

Draft of the federal law «On prevention of viral hepatitis spreading in the Russian Federation»

1. Maintaining the Federal Register of persons with viral hepatitis;
2. Preferential provision with pharmaceutical products for medicinal use;
3. Regular promotion of public awareness on available preventive measures, through mass media among other channels;
4. Improvement of epidemiologic surveillance for the spreading of viral hepatitis;
5. Health care delivery in accordance with the government guaranteed programme of free universal health care;
6. Development of innovative pharma products for diagnostics and treatment of viral hepatitis;
7. Development of international cooperation and regular exchange of information as part of the international programmes for prevention of viral hepatitis spreading, etc.

Thank you!!!