

Hepatitis B and C cause 1.3 million deaths every year.

Chronic hepatitis B and C are life-threatening infectious diseases that cause serious liver damage, cancer, and premature death. More than 300 million people are infected with the hepatitis B virus (HBV) or the hepatitis C virus (HCV) and are at risk of developing escalating health problems. HBV and HCV are responsible for more than half of all new liver cancer cases and one in every 12 cancer deaths. Whereas the burden of other major infectious diseases such as HIV, TB, and malaria is decreasing due to investment, hepatitis has been neglected, resulting in more and more people dying from hepatitis B and C.

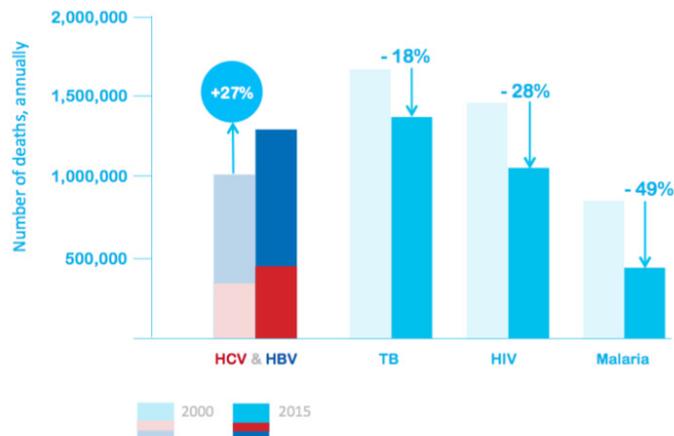
Hepatitis B and C are silent epidemics, hitting children and marginalized populations the hardest.

Ninety-one percent of people with HBV and 80% of people with HCV are unaware of their infection and can unknowingly infect others. HBV often spreads unnoticed from mother to child at birth, putting infants at high risk: 80-90% of babies infected with HBV will develop chronic disease and one in four will die of liver-related causes during adulthood. In addition, in low and middle income countries, millions of people have been inadvertently infected in healthcare settings via the use of unsterilized equipment and unscreened blood transfusions. HIV+ patients are also hard-hit by HBV and HCV, as are other marginalized groups with poor access to care, such as migrants and indigenous populations.

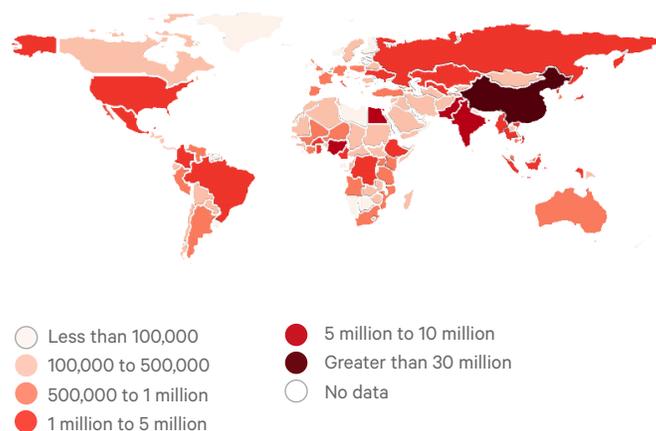
Solutions for hepatitis B and C exist today.

Vaccination provides highly effective protection against HBV, safe blood and infection control should be the basis of any health system and harm reduction works. Existing treatment can effectively manage HBV and prevent liver cancer, and new treatments can cure HCV in nearly all patients. The solutions for putting an end to the HBV and HCV epidemics exist, but need to be made available for all patients.

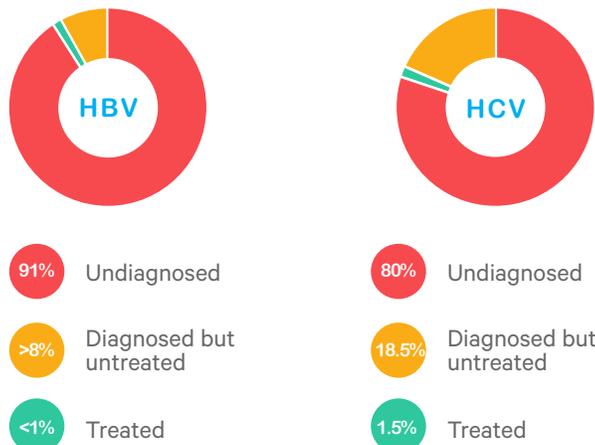
HEPATITIS BURDEN AT A GLANCE



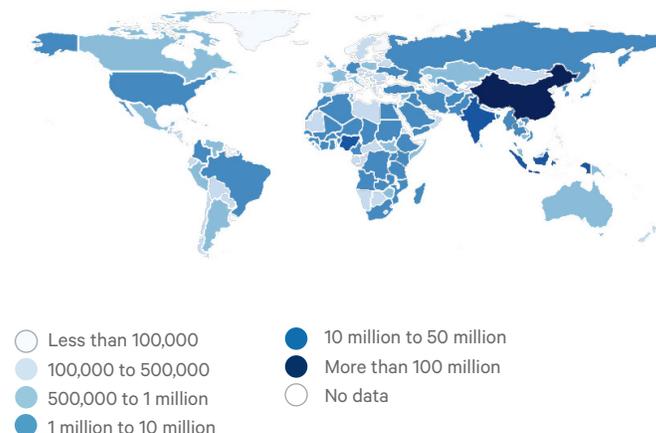
HCV PREVALENCE



ACCESS TO TREATMENT



HBV PREVALENCE



Efforts to address hepatitis are only just beginning.

Few countries have established national plans that make hepatitis treatment and prevention available for all patients. A lack of national and international investments in hepatitis programs, especially in low and middle income countries, means that even fewer countries have a national plan that is properly funded. As a result, the vast majority of patients remain undiagnosed, with only 1% of those infected able to access treatment, and even the birth dose vaccine, which can cost less than 20 cents, is not used in many countries in Africa and the Eastern Mediterranean region.

ELIMINATION STRATEGY AT A GLANCE



Vaccinations

Implement comprehensive hepatitis B virus immunization programs



Prevention of mother-to-child transmission

Provide timely administration of hepatitis B virus birth-dose vaccine and antiviral treatment to pregnant women who are infected



Injection, blood, and surgical safety

Establish and implement national policies and practices on injection, blood, and surgical safety and establish systems of surveillance, haemovigilance, and monitoring



Harm reduction services

Implement comprehensive package of harm reduction services and link hepatitis and harm reduction services



Treatment of chronic disease

Integrate and improve hepatitis testing services, prioritize treatment by increasing access, establish national hepatitis treatment and care guidelines, and provide quality treatment and address comorbidities

HBV and HCV elimination will save millions of lives and advance commitments to global development goals.

Eliminating HBV and HCV as public health threats by 2030 would prevent approximately 36 million infections and save 10 million lives. Hepatitis elimination would also support progress towards the Sustainable Development Goals, particularly targets to end poverty, ensure good health and well-being, and reduce inequalities. Improving access to prevention and treatment services can help protect patients against catastrophic healthcare costs and productivity losses. This can help prevent patients from being pushed into poverty, while saving future healthcare system resources. Elimination would help ensure healthy futures for children; protect, empower and reduce stigma among marginalized populations; and support and protect commitments to HIV+ populations.

HEALTH IMPACT OF HEPATITIS ELIMINATION



Hepatitis elimination will strengthen health systems.

Enhanced infection control services, including injection and blood safety and vaccination for health workers will improve quality standards in health systems and reduce transmission of healthcare-acquired illnesses for both patients and providers. Improved HBV immunization can help increase coverage of other childhood vaccinations and ensure that newborns receive appropriate postnatal care. Prevention of mother-to-child HBV transmission can improve access to perinatal care, ensure healthy pregnancies and promote institutional deliveries. Harm reduction efforts will help prevent the spread of blood borne viruses such as HIV and syphilis.

Donors have a critical role to play.

The world has an extraordinary opportunity to end the HCV and HBV epidemics, but this will not happen without donor commitments. Donors can help lay the groundwork for elimination in low and middle income countries by (i) supporting research and policy efforts to develop national hepatitis plans; (ii) providing financing and funding for the scale-up of cost-effective interventions; and (iii) supporting product and procurement investments to drive down drug and diagnostic prices and bring new technologies to market.

**VIRAL HEPATITIS CAN BE ELIMINATED BY 2030
BUT ONLY IF IT IS MADE A PRIORITY NOW.**