

## No end in sight to 'neglected epidemics' of viral hepatitis

Australia has failed to make meaningful progress in the prevention, diagnosis or treatment of hepatitis B and C, prompting calls for immediate government intervention to avert a 'tidal-wave of life-threatening liver disease'.

A sobering report on the slow progress made to achieve targets endorsed by leading hepatitis organisations in the [Auckland Statement on Viral Hepatitis](#) was delivered by the peak body representing half a million Australians with viral hepatitis.

"Two years ago we warned that failure to act would result in escalating rates of hepatitis B and C and a rising death toll from serious liver disease," said CEO of Hepatitis Australia, Helen Tyrrell.

"We set four year targets to reduce rates of infection, improve diagnosis and bolster treatment numbers. The truth is that the burden of liver disease associated with viral hepatitis is increasing on a daily basis," she said.

Ms Tyrrell told delegates at the Australasian Viral Hepatitis Conference in Alice Springs that "it is to the nation's shame that hepatitis-related liver disease now claims 1,000 lives a year".

"Twenty years ago, loss of life from HIV/AIDS peaked at 738 lives in Australia. A swift and effective national response at that time led to a marked turnaround in HIV mortality," she said.

"We need to achieve the same outcome for hepatitis B and C, and quickly - we don't have the luxury of time."

2016 targets in The Auckland Statement on Viral Hepatitis include:

- Halving the incidence of new hepatitis C infections.
- Consistent approaches to funding of vaccination for people at greatest risk of hepatitis B.
- Ensuring at least 80% of people living with hepatitis B and hepatitis C are diagnosed.
- Guaranteeing that 5% of people living with hepatitis C receive antiviral treatment each year.
- Guaranteeing that 10% of people living with hepatitis B receive antiviral treatment each year.

"We know that needle and syringe supply programs are key to preventing hepatitis C, yet we have no such program in any prison in Australia," Ms Tyrrell said.

"We know the importance of early diagnosis, but we are not screening key communities with high rates of hepatitis B to identify people with undiagnosed and untreated hepatitis B," she said.

"We can vaccinate against hepatitis B, but access to free vaccinations for adults in high-risk groups is patchy at best through state-based programs and is only funded for infants and adolescents by the federal government.

"We know treatment is vital to saving lives, but we are doing little to remove the barriers to treatment for hepatitis B or C or provide access to new hepatitis C medicines that deliver the best chance of a cure."

Ms Tyrrell said that hepatitis healthcare workers and community groups would continue to do the best they can with scant resources, but that ‘meaningful change will not occur without significantly scaled-up investment by all levels of government’.

“At the state and federal levels, health ministers have the opportunity to emulate what their predecessors achieved with HIV over the past decades. We know what is required to reduce infection rates, improve diagnosis, and increase treatment rates but these ambitions will remain pipedreams without funding support and policy changes,” she said.

#### **About Hepatitis B**

- Hepatitis B affects more than 225,000 Australians and is transmitted through blood-to-blood contact or unprotected sexual contact.
- While vaccination rates are high among people born in Australia, they remain low among many people born overseas. Hepatitis B is endemic in Asia Pacific and Africa and in some remote Aboriginal and Torres Strait Islander communities. Most cases of chronic hepatitis B were acquired at birth in countries of high hepatitis B prevalence. The best protection against hepatitis B is to get vaccinated. For those living with chronic hepatitis B, ongoing treatment and monitoring provides the best protection against the development of liver disease and liver cancer.

#### **About Hepatitis C**

- Hepatitis C affects approximately 233,000 Australians and is transmitted through blood-to-blood contact. Approximately 80 per cent of current infections and 90 per cent of new infections are thought to result from unsafe injecting drug use. Hepatitis C can also be contracted through other means, for example unsafe tattooing and body piercing practices and from mother to baby. There is no vaccine to protect against hepatitis C but the infection can be treated and, in many cases, cured.

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