Media Release

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Hepatitis B and hepatitis C - drivers for liver cancer.

Curing hepatitis C and vaccinating against hepatitis B could help drive down liver cancer rates in Australia. Hepatocellular carcinoma (HCC) is the most common type of primary liver cancer in Australia1. HCC most commonly occurs in people with liver disease: particularly in people with chronic hepatitis B and C.

The estimated incidence of liver cancer in Australia has been steadily increasing from 1,690 people affected in 2014 to 1,840 people in 2016. Similarly, the number of deaths from liver cancer each year has increased with 1,805 deaths in 20162.

“World Cancer Day is a good time to be mindful of the role hepatitis B and C plays in the concerning increase in the incidence of liver cancer in Australia”, says Kevin Marriott, Director of Policy and Programs at Hepatitis Australia.

In 2015, there were an estimated 227,306 people living with hepatitis C, of which 3,034 who developed either decompensated cirrhosis or hepatocellular carcinoma. There were 818 deaths attributed to hepatitis C infection (an increase of 111% since 2006)³. As the number of people with hepatitis C-related cirrhosis (severe liver scarring) increase, which is up 96% since 2006, the number of people developing liver cancer and ensuing deaths is set to increase.

Mr Marriott says, “Ensuring access to a cure for hepatitis C infection before developing cirrhosis is important to stop increasing liver cancer deaths. With the latest treatments this is now possible for the majority of people, regardless of their hepatitis C genotype.”

The data collected for advanced liver illness from hepatitis B is less comprehensive but it is believed to be a similar story. In 2015 there were an estimated 232,607 people living with hepatitis B and 419 deaths attributed to hepatitis B infection (24 more than the previous year)³.

“In Australia we have access to affordable, highly effective, preventative vaccine for hepatitis B. While Australia provides birth dose vaccination for hepatitis B, we need to ensure all the adult populations most at risk also have ready access to the vaccine as part of the National Immunisation Program,” said Mr Marriott.

While there is treatment available for both forms of hepatitis, only hepatitis C can be cured. The new hepatitis C medicines are 90-95% successful for all genotypes and much easier to take than before.

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3 Kirby Institute, Hepatitis B and C in Australia Annual Surveillance Report Supplement 2016
Appropriately timed treatment for hepatitis B can significantly reduce the risk of developing life threatening liver disease, and progressing to liver cancer.

There is an effective preventative vaccine for hepatitis B but not for hepatitis C. Both hepatitis B and hepatitis C can be prevented through safe behaviours such as safer sex^ and not sharing any injecting equipment. This also extends to non-professional skin piercing procedures.

Mr Marriott said “We have to remember that reducing the number of people living and succumbing to the effects of hepatitis B and C requires a continued focus on preventing, treating, curing and eliminating viral hepatitis. This will support a turnaround in the increasing mortality from liver cancer.”

^ Both hepatitis B and C are blood borne viruses and hepatitis B is also sexually transmissible. There have been some cases of the sexual transmission of hepatitis C but this has generally been limited to gay men living with HIV.

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