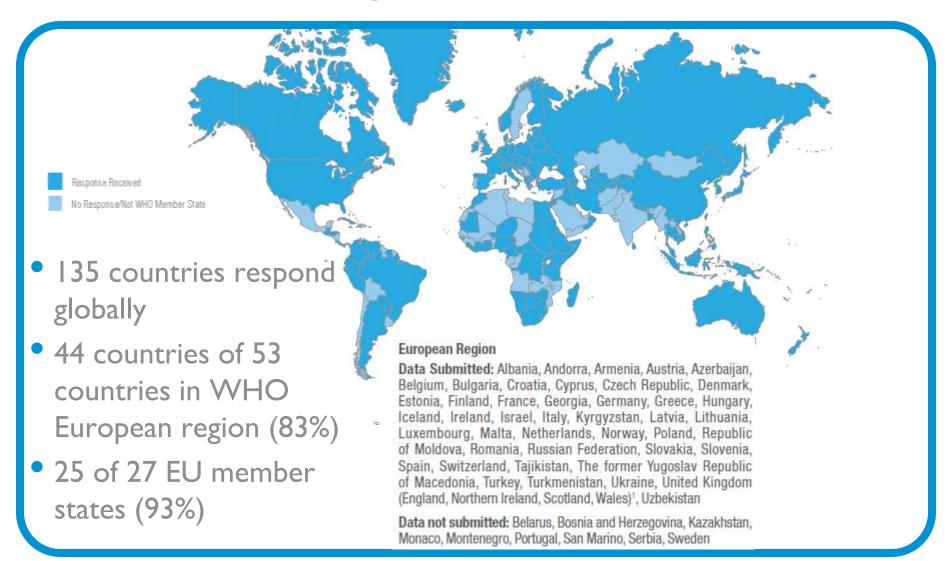


Background to the report

- Prior to 2009 viral hepatitis has not been seen as a global health issue nor addressed globally
- Viral hepatitis is added to the 62nd World Health Assembly agenda (May 2009) but postponed
- July 2009 WHO commissions the Alliance to survey hepatitis policy in the 193 Member States
- Survey jointly developed and piloted
- Report launched at International Liver Congress one month prior to the start of the 63rd World Health Assembly



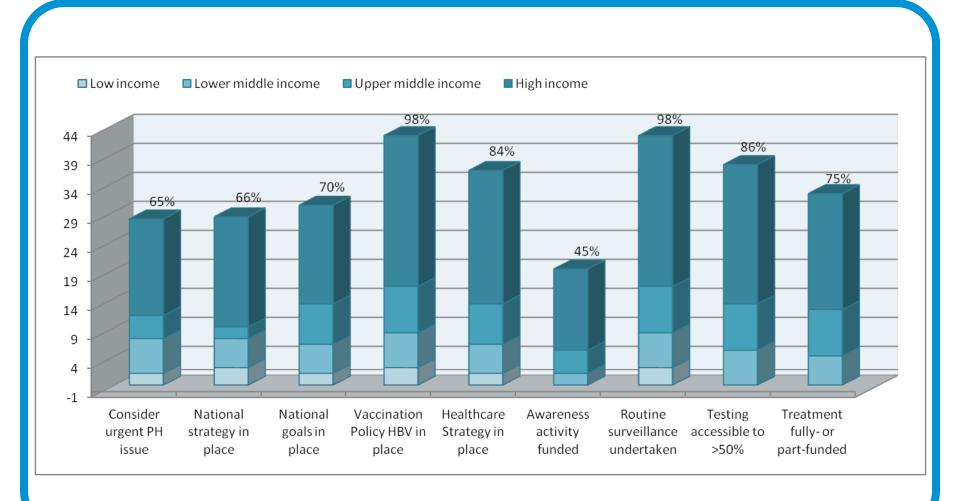




- Is HBV and/or HCV considered an urgent public health issue?
- Do you have a specific strategy to prevent & control HBV and/or HCV?
- Is there a designated individual to lead the strategy?
- Are there goals for the prevention and control of HBV and/or HCV?
- Do you have a HBV vaccination policy?
- Is there a specific strategy to prevent infection in healthcare settings?
- Have there been any Govt funded awareness campaigns in last 5 years?
- Do you carry out routine HBV and/or HCV surveillance?
- Is testing easily accessible to more than half the population?
- Is anti-viral treatment funded or part-funded by the state?



Europe – Regional Overview





Europe – Regional Overview

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Table 1	. Statisticai	OVERVIOU
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	Responding countries	Urgent PH issue	National strategy	National goals	Vaccination Policy HBV	Healthcare Strategy	Awareness	Surveillance	Accessible Testing	Treatment funding
High income	87% (26)	64%	73%	65%	100%	88%	54%	100%	92%	72%
Upper middle income	62% (8)	50%	25%	88%	100%	88%	50%	100%	100%	100%
Lower middle income	100% (7)	86%	71%	71%	86%	71%	29%	86%	86%	71%
Low income	100% (7)	67%	100%	67%	100%	67%	0%	100%	0%	0%
Total	83% (44)	65%	66%	70%	98%	84%	45%	98%	86%	75%



Europe – Regional Overview

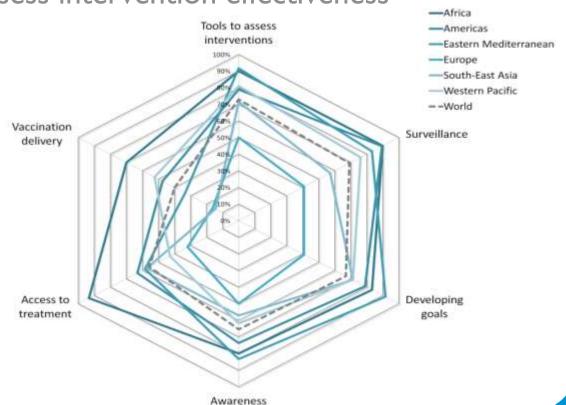
- 65% (56% of responding EU member states) consider hepatitis an urgent public health issue vs. 80% globally
- 66% (58% of EU member states) report having a national strategy.
 - EU member states that report having a strategy: Austria, Belgium, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Italy, Luxembourg, Malta, Netherlands, United Kingdom
 - BUT of all WHO EURO, 28 gave details: 8 only mention HBV vaccination
- HIV coinfection monitored in 49% of WHO Euro, 48% of EU members
- Testing is not available confidentially or anonymously in 45% (36% EU)
- Testing is easily accessible (financially and geographically to >50% of population) in 23/25 EU member states that answered (92%, vs. 86% overall)
- No free testing provision in 18% of countries (16% EU member states)
- \bullet No patient pathway in 32% (12% EU) and no government funding for treatment in 25% (16% EU)
- 63% (64% in EU) work with non-state sector in developing policy.



Viral Hepatitis: Global Policy – needs

Countries were asked in which areas they would welcome help:

- Developing goals for prevention and control
- Developing tools to assess intervention effectiveness
- Raising awareness
- Surveillance
- Treatment access
- Vaccination delivery
- Other





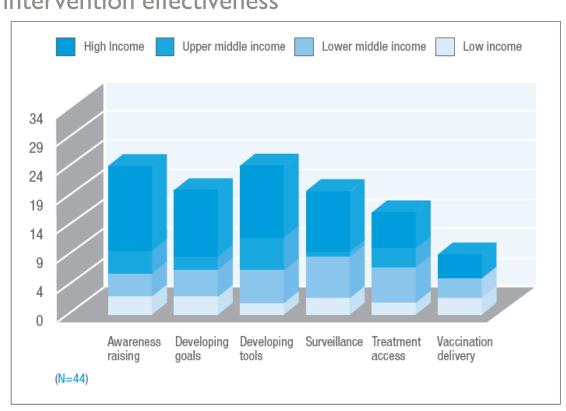
Viral Hepatitis: Global Policy - needs

77% of European countries (34) want assistance in one of:

- Developing goals for prevention and control
- Developing tools to assess intervention effectiveness
- Raising awareness
- Surveillance
- Treatment access
- Vaccination delivery

2 countries want help in all 6 areas

Also requested: help in ensuring sustainability of interventions





Estimated Mortality (200 Acute hepatitis B Acute hepatitis C

Total 2646.66 915.46

National strategy: A specific strategy for the prevention and control of hepatitis B and/or hepatitis C is in place. There is a designated individual to lead this strategy nationally; they do not work exclusively on the hepatitis strategy.

Goals: Goals for the prevention and control of hepatitis B and/or hepatitis C are in place.

Hepatitis B vaccination policy: A national hepatitis B vaccination policy is in place. Groups covered by this policy include: Infants.

campaigns for hepatitis B and/or hepatitis C have taken place in the past five years. Action to reduce stigma experienced by, and discrimination against, people who have hepatitis B and/or hepatitis C has not been taken by the government.

Country Chanifestian (2000): 1 a

WHO Assistance

The government of Bangladesh would welcome assistance from the WHO in the prevention and control of hepatitis B and/or hepatitis C in the following areas:

- Awareness raising
- Increasing access to treatment
- Delivery of vaccination
- Developing goals for the prevention and control of hepatitis B and hepatitis C
- Developing tools to assess the effectiveness of interventions
- Surveillance



Viral Hepatitis: Global Policy - Europe

- 35% of countries that want help developing goals report having goals in place
- 18 governments (41%) want help with surveillance. 17 of these conduct it already
- Over I/3 of governments that have funded awareness raising also want technical assistance with this
- Assistance assessing the effectiveness of interventions chosen by half, including 45% of countries that report having a strategy

Any perception that Europe's current efforts to tackle viral hepatitis are adequate is wrong



Viral Hepatitis: Global Policy - Europe

THANK YOU

http://www.worldhepatitisalliance.org/en/Policy/2010PolicyReport.aspx

