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For immediate release

Health ministers must vote ‘yes’ to eliminate hepatitis by 2030

Hepatitis coalition urges health ministers in Asia Pacific to vote “YES” on the World Health Organization’s draft global targets for hepatitis elimination

TOKYO (Wednesday, 24 February 2016) – Public health experts and clinicians, attending today’s Policy Symposium organised by the Coalition to Eradicate Viral Hepatitis in Asia Pacific (CEVHAP), called upon governments to endorse the draft World Health Organization Global Health Sector Strategy on Viral Hepatitis (the WHO GHSSVH).

At the Symposium, CEVHAP members cautioned that failure to pass the targets in the draft strategy proposed by the WHO for endorsement at the 2016 World Health Assembly in May would result in a significant setback to the global commitment to combat hepatitis.

Recognised for the first time as a development issue, hepatitis has been placed on the United Nations 2030 Agenda for Sustainable Development and Member States have made a commitment to combat hepatitis under Goal 3 of the Sustainable Development Goals (SDGs).

“While the SDGs recognise hepatitis as one of the global development priorities, they do not provide an action plan to reduce and eliminate the hepatitis burden,” said Professor Kenji Shibuya, Professor of Global Health at University of Tokyo, who was keynote speaker at the CEVHAP Symposium, held as part of the annual conference of the Asian Pacific Association for the Study of the Liver (APASL). “That is why the WHO GHSSVH and the targets within it are so important. The strategy delivers the essential roadmap to achieve the hepatitis SDG.”

The draft WHO GHSSVH proposes a set of priority actions for governments to stop hepatitis transmission, strengthen hepatitis services and broaden access to care. Importantly, it has set targets for 2020 and 2030, which can lead the world to eliminating hepatitis by 2030 if they are met.

To eliminate chronic hepatitis B and C as a public health threat by 2030, the draft strategy proposes that diagnosis of global hepatitis B and C infections need to reach 90% by 2030, a significant increase from the current 5%. Globally, new cases of chronic hepatitis infection need a 30% reduction by 2020 and 90%

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by 2030 from 2015 levels. Hepatitis B and C mortality needs to be reduced by 10% by 2020 and 65% by 2030 from 2015 levels.¹

In May this year, the World Health Assembly will vote on whether or not to pass the draft strategy. “Adopting the hepatitis targets set out by the WHO is the critical first step towards eliminating hepatitis by 2030. These targets are ambitious, but realistic and achievable,” says Professor Ding-Shinn Chen, Co-Chair of CEVHAP.*

If global and national responses continue at the current pace, 20 million people globally will have died from hepatitis B by 2030 and the number of people living with hepatitis C significantly increased.¹ Already 400 million people are living with chronic hepatitis in the world today.¹ Asia Pacific bears the bulk of the disease burden, where 70% of the global deaths from hepatitis occur.²

CEVHAP Co-Chair Professor Locarnini** adds, “After years of neglect, the global community now recognizes the urgent need to combat viral hepatitis as a threat comparable to HIV, tuberculosis and malaria. Now that there is the global momentum, policy impetus and necessary knowledge to eliminate, and ultimately eradicate hepatitis, action can no longer be delayed. We urge all governments to adopt the draft WHO Global Strategy on Viral Hepatitis at the World Health Assembly in May 2016.”

The draft WHO Global Health Sector Strategy on Viral Hepatitis is available here:

http://www.who.int/hepatitis/strategy2016-2021/Draft_global_health_sector_strategy_viral_hepatitis_13nov.pdf?ua=1

*Professor Ding-Shinn Chen is a former Dean of the College of Medicine, National Taiwan University, Taipei

**Stephen Locarnini is also Director of WHO Collaborating Centre for Virus Reference and Research, and Head of Research & Molecular Development at the Victorian Infectious Diseases Reference Laboratory, Melbourne.

More on viral hepatitis

Viral hepatitis is a disease of high prevalence and high mortality. Across the world, 400 million people are living with chronic hepatitis.¹ Asia Pacific is the epicentre of the epidemic, with one million people dying from hepatitis and its complications per year, a toll three times as high as HIV/AIDS.²

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Viral hepatitis is preventable and its treatment is crucial to the prevention of chronic liver diseases, such as cirrhosis and liver cancer. Existing antiviral treatment can effectively suppress the hepatitis B virus, and new Direct Acting Antiviral (DAA) treatment can cure 95% of people with hepatitis C.³

Of the 818,000 liver cancer deaths worldwide in 2013, 300,000 (37%) result from hepatitis B infection and 343,000 (42%) from hepatitis C infection, both significantly higher than the 11% of liver cancer deaths caused by alcohol abuse.⁴

About CEVHAP

The Coalition to Eradicate Viral Hepatitis in Asia Pacific (CEVHAP) is the first organisation of its kind in the region, established as an independent, multidisciplinary body to advocate for public policy reform to reduce the burden of and ultimately eliminate viral hepatitis in Asia Pacific.

Incorporated in October 2010, CEVHAP membership is comprised of many world-renowned hepatitis experts, including people living with the infections. Utilizing the collective expertise of its members, CEVHAP works in partnership with a wide range of stakeholders in conducting policy research to inform policy development and facilitate broader education in hepatitis.

For more information, please visit www.cevhap.org, or follow CEVHAP on [Facebook](#), [Twitter](#), [LinkedIn](#) and [Weibo](#).

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