Prevention and Control of Viral Hepatitis Infection: WHO Framework for Global Action
## Characteristics of main types of viral hepatitis infections

<table>
<thead>
<tr>
<th></th>
<th>Hep A</th>
<th>Hep E</th>
<th>Hep B</th>
<th>Hep C</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Main modes of transmission</strong></td>
<td>Contaminated food, water</td>
<td></td>
<td>Blood, sex, mother-to-child</td>
<td></td>
</tr>
<tr>
<td><strong># chronic infections (2005)</strong></td>
<td>0</td>
<td>NA</td>
<td>240 million¹</td>
<td>130-170 million²</td>
</tr>
<tr>
<td><strong>Annual deaths</strong></td>
<td>34,000³</td>
<td>70,000⁴</td>
<td>620,000⁵</td>
<td>350,000²</td>
</tr>
<tr>
<td><strong>Health Outcome</strong></td>
<td>Acute hepatic failure</td>
<td>Acute hepatic failure, maternal death</td>
<td>Acute failure, cirrhosis, hepatocellular carcinoma</td>
<td></td>
</tr>
<tr>
<td><strong>Vaccine</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td><strong>Other modes of prevention</strong></td>
<td>Safe water, improved sanitation</td>
<td></td>
<td>Universal precautions, blood screening, behavior change</td>
<td></td>
</tr>
</tbody>
</table>
2010 World Health Assembly resolution 63.18:
- Sponsored by Brazil, Columbia, and Indonesia
- Call for a comprehensive approach to hepatitis prevention and control

Mandate to WHO:
- Develop guidelines and strategies for surveillance, prevention and control of viral hepatitis
- Support development of scientific research
- Improve global prevalence and disease-burden estimates
- Mobilize support
- Strengthen WHO Safe Injection Global Network
WHO Viral Hepatitis Programme

• Created December 2011

• Published **Framework for Prevention and Control of Viral Hepatitis Infection**:  
  – Vision: A world where viral hepatitis transmission is stopped and all have access to safe and effective care and treatment  
  – Goals to:  
    • reduce the transmission of hepatitis-related viruses  
    • reduce the morbidity and mortality due to viral hepatitis and improve the care of patients with viral hepatitis  
    • reduce the socio-economic impact of viral hepatitis at individual, community and population levels
GHP – Location in WHO organigram

Health Security and Environment Cluster

Pandemic and Epidemic Diseases Department

Antimicrobial Resistance, Infection Control and Publications Team

Global Hepatitis Programme
WHO-HQ Global Hepatitis Programme

Stefan Wiktor, Team Lead
Hande Harmanci
Tim Nguyen
Naoko Obara
Raquel Jose – World Hepatitis Alliance
Global Hepatitis Framework

Axis 1: Partnerships, resource mobilization and communication

Axis 2: Data for policy and action

Axis 3: Prevention of virus transmission

Axis 4: Screening, care and treatment
Axis 1: Increasing engagement through awareness, partnerships and mobilizing resources

Increasing awareness among policy makers, health professionals, and the public about viral hepatitis

• Support for World Hepatitis Day

• Global Hepatitis Network: Establish global network of stakeholders for viral hepatitis prevention and control

• Mobilize resources
  – WHO
  – Countries with limited resources
World Hepatitis Day

28 July

Don’t let hepatitis tear your life apart. Know it. Confront it.

www.worldhepatitisdoday.info

WOL HEPATITIS DEI 28 JULAE

KATEM HEPATITIS B LONG 2012

Hemi IMPORTANT blong Stikim pikinini taem hemi born.
Hemi givim Laef proteksen

World Health Organization
Axis 2: Evidence-based policy and data for action

Increase collection, analysis of data:

- Publish global prevalence and burden estimates for viral hepatitis

- Develop:
  - Guidelines for hepatitis surveillance in low-income countries
  - Monitoring and evaluation framework

- Conduct country hepatitis burden-of-disease and hepatitis response workshops
Global epidemiology of hepatitis B virus infection: New estimates of age-specific HBsAg seroprevalence and endemicity

J.J. Ott¹, G.A. Stevens³, J. Grogger², S.T. Wiersma⁴*

¹ World Health Organization, 20, Avenue Appia, 1211 Geneva 27, Switzerland
² Centers for Disease Control and Prevention, Atlanta, GA, USA

Research article
The risk of perinatal hepatitis B virus transmission: hepatitis B e antigen (HBeAg) prevalence estimates for all world regions
Jórdís J Ott, Gretchen A Stevens and Steven T Wiersma

BMC Infectious Diseases 2012, 12:131
doi:10.1186/1471-2334-12-131
Published: 9 June 2012

Hepatitis A virus seroprevalence by age and world region, 1990 and 2005
Kathryn H. Jacobsen³,* and Steven T. Wiersma²,*
³ Department of Global & Community Health, George Mason University, 4400 University Drive ME 587, Fairfax, VA 22030, USA
² Expanded Program on Immunization, Department of Immunization, Vaccines and Biologicals, World Health Organization, 20, avenue Appia, 1211 Geneva 27, Switzerland
Axis 3: Prevention of virus transmission

- Promote expansion of immunization:
  - Protection of newborns, health-care workers, and high-risk groups against hepatitis B
  - Promote innovative approaches for the future

- Promote behavioral and structural interventions:
  - Safer sex
  - Safe and rational use of injections
  - Safe blood transfusion
  - Ensuring safe food and water for countries and proper disposal of sanitary waste
Hepatitis B infant immunization: A well accepted strategy that works!

Figure 1.
Future deaths prevented through continuous investments into routine immunization programmes

Source: WHO Department of Immunization, Vaccines and Biologicals, 2010 and Investing in Immunisation through the GAVI Alliance, 2011
WHO Guidance on Prevention of Viral Hepatitis B and C in People Who Inject Drugs (PWID)

1. To implement & scale up the *Comprehensive harm reduction package for HIV*, in particular Needle and Syringe Programmes (NSPs) and Opioid Substitution Therapy (OST)

2. To offer **HBV vaccination** with the rapid regimen and incentives to increase uptake and completion

3. For NSPs to also provide **low dead-space syringes** for distribution

4. To offer **peer interventions** to reduce the incidence of viral hepatitis
Axis 4: Screening, care and treatment

- Advocate for better data on burden of disease
- Develop treatment guidelines
- Prequalify diagnostics
- Prequalify therapeutics
- Develop training
- Advocate/negotiate for price reductions
- Assist countries in developing national strategies
Timeline of development of WHO hepatitis C screening, care, and treatment guidelines

Submit proposal to GRC

Guideline Development Group Meeting-1

Oct 2012

Dec 2012

Guideline Development Group meeting-2

Systematic Reviews

Guidelines draft, review and clearance

May 2013

Jun-Sep 2013
GHP – Collaborations

WHO Collaborating Centers on VH

WHO-HQ GHP

WHO Global Hepatitis Network

WHO Regional Office

WHO Country Office

Country MOH

WHO-HQ Hepatitis Action Group
WHO Viral Hepatitis Action Group

Documenting the Impact of Hepatitis B Immunization: best practices for conducting a serosurvey

HEPATITIS C ASSAYS: OPERATIONAL CHARACTERISTICS (PHASE I)

REPORT 1
JANUARY 2001

HIV/AIDS Programme

GUIDANCE ON PREVENTION OF VIRAL HEPATITIS B AND C AMONG PEOPLE WHO INJECT DRUGS

JULY 2012
Working together with WHO

- Global Hepatitis Network
- WHO Collaborating Centers
Global Hepatitis Network:
Purpose

To provide a forum for exchange of information and collaboration among the various stakeholders in order to implement a common viral hepatitis work plan
Global Hepatitis Network: Members

- WHO Action Group
- Universities
- United Nations Agencies
- Research Institutions
- Civil Society Organizations
- Professional Organizations
- Development Agencies
- Patient Groups
An example: Hepatitis E Outbreak Response Manual

• Global HepNet Hepatitis E Working Group

• Interagency collaboration:
  – WHO
  – UNICEF
  – UNHCR
  – International Organization for Migration
  – International Center for Migration, Health and Development
  – Medecins Sans Frontieres
  – International Medical Corps
"In everything we do, WHO relies on the expertise of hundreds of formal WHO Collaborating Centres, in your countries, and thousands of the best brains in science, medicine, and public health, in your countries. They give us their time freely and it is my strong impression that they do so with pride."

Dr Margaret Chan, Director-General, address to the Sixty-fourth World Health Assembly, 16 May 2011
Conclusions: Challenges and opportunities

- 5 different diseases
- Increasing awareness of burden of hepatitis-related diseases
- Huge mandate – small team
- Hepatitis control is cross-cutting
- Fast changing landscape
SUBSCRIBE to the WHO Viral Hepatitis Listserv

Send an e-mail to:

hepatitis@who.int

with your name, affiliation, city, country and stay informed!
Alleviate human suffering...

Thank you.


