Summit Conference
Hepatitis B and C in Mediterranean and Balkan Countries

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Call to Action

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This Call to Action is endorsed by:
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The Conference on Hepatitis B and C in Mediterranean and Balkan Countries has united a range of stakeholders to urge the formulation and implementation of effective policies and targeted actions by national governments, healthcare providers and civil society in the fight against hepatitis B and C.

The Conference commends previous work in the domain of hepatitis B and C, in particular the 63rd World Health Assembly's resolution on Viral Hepatitis of May 2010, MEP Thomas Ulmer's Call to Action on Hepatitis B launched at the European Parliament in 2006, the European Parliament's Written Declaration on Hepatitis C in 2007, the Call to Action launched at the Brussels Conference on Hepatitis B and C in Europe in 2010 and the WHO Prevention and Control of Viral Hepatitis Infection: Framework for Global Action, launched in July 2012.[1]

The Steering Group of the Conference on Hepatitis B and Hepatitis C in Mediterranean and Balkan Countries, together with its partner associations, calls on the countries of these regions to create national viral hepatitis strategies and action plans and, in particular, to:

1. **Involve all sectors of society in the fight against hepatitis B and C**
2. **Place the fight against hepatitis B and C within a Right to Health framework**
3. **Actively participate in World Hepatitis Day**
4. **Improve awareness of the health and economic impact of hepatitis B and C**
5. **Strengthen surveillance of hepatitis B and C**
6. **Build inter-country research capacities dedicated to hepatitis B and C**
7. **Make prevention and control of hepatitis B and C a key part of public health action**
8. **Invest in better case detection and treatment programmes in primary health care**
9. **Develop outreach programmes to ensure more voluntary counselling and testing**
10. **Explore innovative ways of reaching all vulnerable groups, including migrants**
11. **Ensure universal access to treatment**
12. **Create community-based programmes to support people living with viral hepatitis**

WHO's Global Hepatitis Programme launched on World Hepatitis Day 2012 the *Prevention and Control of Viral Hepatitis Infection: Framework for Global Action*. This Sets out four axes for action:

1. **Partnership, mobilization and communication**
2. **Data for policy and action**
3. **Prevention**
4. **Screening, care and treatment.**

Axis 1

1. Involve all sectors of society in the fight against hepatitis B and C
> organize technically backed briefings for senior policy makers in all government sectors
> work with all stakeholders to mobilize the necessary funding to implement the action plan
> involve non-governmental organizations representing key risk groups in decision making

2. Place the fight against hepatitis B and C in a Right to Health framework
> adopt and use human rights approaches that have been developed in HIV/AIDS
> link human rights approach to public health principles and health benefits
> ensure that those living with hepatitis B and C are aware of their rights

3. Actively participate in World Hepatitis Day
> work with experts, civil society and healthcare providers to raise hepatitis awareness
> create public health campaigns around the impact of hepatitis B and C on health
> take all necessary measures, including legislation, to tackle stigma and discrimination

Axis 2

4. Improve awareness of the health and economic impact of hepatitis B and C
> develop robust national databases on hepatitis B and C and liver cancer
> emphasize hepatitis B and C in all medical and nursing education curricula
> make policy makers more aware of the economic impact of untreated hepatitis B and C

5. Strengthen surveillance of hepatitis B and C in all countries in these regions
> promote routine centralized hepatitis reporting with standardized case definitions
> promote national and inter-country use of standard routine surveillance protocols
> monitor and evaluate the effectiveness of prevention and control interventions

6. Build inter-country research capacities dedicated to hepatitis B and C
> promote and fund research on epidemiology and factors affecting hepatitis B and C
> promote and fund research on ways of preventing and managing hepatitis B and C
> promote and fund collaborative inter-country research using common protocols

Axes 3 & 4

7. Make prevention of hepatitis B and C a central part of public health action
> ensure high coverage of universal neo-natal HBV vaccination, especially birth dose
> ensure HBV vaccination of healthcare workers and other risk groups
> develop tailored initiatives for injecting drug users and other special risk groups

8. Invest in better case detection and treatment programmes in primary health care
> develop protocols on case detection and contact prevention for PHC
> develop special training programs for PHC staff based on standardized new protocols
> ensure referral for people who need to be seen at a secondary or tertiary level

9. Develop out-reach programmes to ensure more voluntary counselling and testing

> develop/adapt voluntary counselling and testing (VCT) protocols and train national staff
> identify ways of encouraging/incentivising high risk people to be tested, including screening
> ensure that policies on hepatitis B and C VCT include access to and retention in treatment

10. **Explore innovative ways of reaching all vulnerable and underserved groups**
> identify the most vulnerable groups and their barriers to healthcare, including migrants
> give special attention to groups with highest rates of transmission and burden of disease
> ensure equity of access to hepatitis prevention and control measures

11. Ensure universal access to treatment
> strengthen treatment policies and health systems capacities in treatment
> adopt international guidelines and recommendations on treatment
> train healthcare providers in hepatitis B and C management

12. Create community based programmes for people living with viral hepatitis
> assess the needs of people living with hepatitis B and C, especially vulnerable groups
> train and support community based groups to improve "living with hepatitis B and C"
> ensure the integration of community based groups into the national action plan

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[1] ***Of particular note are:***
• *The 63rd World Health Assembly Resolution on Viral Hepatitis, adopted on 21 May 2010;*
• *MEP Thomas Ulmer's Call to Action on Hepatitis B launched at the European Parliament in 2006, and the European Parliament's Written Declaration on Hepatitis C requesting i.a. a Council Recommendation to promote screening for Hepatitis;*
• *The European Parliament Report of April 2010 on the European Commission's Communication on Action Against Cancer, which "Urges that… the prevention and control of diseases which can develop into cancer, for instance primary and secondary prevention of viral hepatitis and treatment where appropriate, should be addressed by the Cancer Partnership and in future EU initiatives, such as a revised Council recommendation on cancer screening";*
• *The inclusion of Hepatitis B and C in the surveillance and monitoring programmes of the European Centre for Disease Prevention and Control (ECDC) and the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA);*
• *The state of hepatitis B and C in Europe: Report from the Hepatitis B & C Summit Conference. J Viral Hepatitis 2011, 18 (Suppl 1);1-16*
• *The joint "ECDC and EMCDDA guidance. Prevention and control of infectious diseases among people who inject drugs, EMCDDA/ECDC, Stockholm, October 2011";*
• *Work currently undertaken by the European Association for Disease of the Liver (EASL), the European Liver Patient Association (ELPA), and the Viral Hepatitis Prevention Board (VHPB).*