Impact of the hepatitis resolution adopted by the World Health Assembly (WHA 63.18)

19 November 2010
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28 July designated as World Hepatitis Day

Member States: improve surveillance, strengthen lab capacity, support integration, incorporate policies, strategies and tools recommended by WHO, strengthen national health systems, protect health-care workers, provide access to preventive, diagnostic and treatment technologies against viral hepatitis; implement monitoring and evaluation tools; observe World Hepatitis Day, promote injection safety
WHO: establish guidelines, strategies, time-bound goals and tools for surveillance, prevention and control of VH; support research, assess global and regional economic impact and burden; support events to mark World Hepatitis Day; strengthen surveillance, prevention and control programmes, diagnostic and laboratory capacity, and management of VH, enhance access to treatments in developing countries; strengthen SIGN; report to 65th WHA on the implementation
Resource Needs

- US$ 30 million are needed for the next five years
- Technical units may need additional resources
- HQ: two additional professional and 1 general service staff
- One additional professional staff in each of regional offices
- Dedicated national staff in at least 10 countries
- Expansion into African, European, and Eastern Mediterranean regions and then into remaining regions
Six Months and Counting

- Establish global hepatitis programme in WHO

- Draft comprehensive strategy through consultation
  - HQ internal: Nov 16, 2010
  - Regional internal: Jan 10, 2011
  - External: Jan 11/12, 2011

- Mobilize resources
  - Interest from US, Germany, Qatar, others

- Implement, implement, implement

- Monitor and evaluate
Prevent

- Immunization against hepatitis B
  - HepB birth dose, increase HepB3
  - Increase coverage older children, MARPs, HCWs
  - Set and achieve control goals

- Safe healthcare to prevent blood-borne pathogen transmission
  - Safe blood, safe injection, community awareness

- Immunization, safe food and water to prevent hepatitis A
Identify and Treat

- Develop evidence and policy basis for screening and treatment of viral hepatitis
- Formulate guidelines for treatment of chronic viral hepatitis, especially for resource-constrained settings;
- Expand care and treatment services for people chronically infected with hepatitis viruses.
Integrate

- Integrate interventions for the prevention, treatment and care of HBV/HCV into existing services for those at risk for HIV and STI infections and for IDUs
  - access to sterile needles and syringes
  - hepatitis B vaccination
  - antiviral treatment

- Integrate viral hepatitis prevention and control into national cancer control programmes

- Services and programmes can provide good entry points for both infected and most-at-risk people, and coordination can promote synergies.
Innovate

- Prioritize new preventive strategies to prevent chronic liver disease and liver cancer, including;
  - development of vaccines for hepatitis C and E
  - technologies for vaccination: use of vaccine out of cold chain, needle free delivery, etc
  - technologies for screening
  - technologies for safe health care
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Internal Consultation

- Inventory of current activities by functional areas

- Gap analysis
  - Coordination of hepatitis-related activities in WHO
  - Coordination with other stakeholders
  - Advocacy activities
  - Resource mobilization
  - Case definitions
  - Screening guidelines
  - Risk groups prevention
  - Core indicators
  - Treatment strategies
Core Indicators

- Exist for key prevention activities
- Need development for surveillance, screening, care & treatment, integration, innovation
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Regional Progress

- Western Pacific: Expert Review Panel reactivated
- Eastern Mediterranean: Focus on assessing progress
- South-East Asia: Consultation—June
- Europe: ?
- Americas: ?
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Thanks