

Media Release

PEOPLE WHO USE DRUGS REQUIRE PRIORITISATION NOT EXCLUSION IN EFFORTS TO ELIMINATE HEPATITIS C

(Wednesday, 6th September 2017: New York) An international conference bringing together hepatitis C experts from around the world is today calling for strategies to prioritise people who use drugs, saying hepatitis C elimination is impossible without them.

"The number of people around the world dying from hepatitis C is increasing. We have the tools to reverse this trend, to eliminate this disease and save millions of lives. But it will not happen until people who use drugs become a focus of our efforts," said Associate Professor Jason Grebely, President of the International Network of Hepatitis C in Substance Users (INHSU), the convenors of the conference.

Hepatitis C is a blood borne virus that if left untreated can result in cirrhosis, liver cancer, and liver failure. Globally, there is an estimated 71.1 million people with chronic hepatitis C, resulting in over 700 000 deaths each year and the numbers are increasing. Eight per cent of those living with the disease and almost a quarter of new infections are in people who use drugs.

New, highly effective curative treatments have sparked hope of a world free of hepatitis C. Countries like Australia are currently on track to eliminate the disease as a public health concern by 2026 thanks to a public health strategy that offers treatment to all without restriction, and the prioritisation of people who use drugs. However in the US and many countries globally, hepatitis C testing, linkage to care, and treatment for people who use drugs remain low.

Why treat?

- It is essential for elimination. Without treatment for people who use drugs, elimination of hepatitis C will be impossible as the disease prevalence in this group is simply too high.
- It can be cost effective compared with delaying until the development of cirrhosis, decompensated liver disease, and liver cancer.
- It will reduce onward transmission: Studies from Scotland, Australia and Canada indicate that a 3 to 5 fold increase in the number of people who inject drugs on treatment could reduce chronic hepatitis C prevalence by 15-50% within a decade.
- It works. Recent evidence shows that new hepatitis C cures are just as effective in people who use drugs as other populations and that reinfections levels are low.

Experts at the <u>6th International Symposium on Hepatitis Care in Substance Users</u> say that to be successful, elimination of hepatitis C in people who use drugs requires careful integration with harm prevention programs and linkage to care, as well as a review of policies that drive disease spread. Research being presented at the conference demonstrates that:

• Opioid Substitution Therapy (OST) and Needle and Syringe Programs (NSP) can reduce hepatitis C incidence by up to 80%.



6th international Symposium on Hepatitis Care in Substance Users 😑 Jersey City/New York, USA 🥚

- 6 8 September 2017
- Response to new hepatitis C DAA treatment among people who use drugs is high and reinfection is low.
- Community involvement is key to successful program implementation.

"Access to good quality healthcare should be a basic human right for any person, irrespective of whether they use drugs, " said A/Prof. Grebely. "But when providing this also means we are able to eliminate a disease currently affecting 71 million people around the world, then taking action becomes even more of a moral and public health imperative. We cannot afford to delay any longer."

ABOUT THE CONFERENCE

The <u>6th International Symposium on Hepatitis Care in Substance Users</u> is the leading international conference focused on the management of hepatitis among substance users. It is organized by the International Network for Hepatitis in Substance Users (INHSU). The symposium has been previously held in Zurich, Brussels, Munich, Sydney and Oslo. The 6th International Symposium on Hepatitis Care in Substance Users is taking place in New York.

RESEARCH TO BE PRESENTED AT INHSU 2017

Links to abstracts and select presentations will be posted on the <u>INHSU conference website</u>. The conference will present latest research on:

- Cost-effectiveness of scaling up HCV prevention, testing and treatment among people who inject drugs;
- The rising burden of opioid use in North America;
- Needle & Syringe Programmes (NSP) and Opioid Substitution Therapy (OST) including the cost-effectiveness of NSP;
- Strategies to enhance prevention of HCV infection and reinfection;
- Novel diagnostics for HCV infection;
- Updates on models of care;
- > Efficacy and safety of new HCV therapies in people who inject drugs.

View the conference speakers View the conference program

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