

Impact and Implementation of the WHO Resolution for Viral Hepatitis

HepDART
December 2011

Dr. Steven Wiersma
WHO Geneva



**World Health
Organization**



WHA63.18: Comprehensive Hepatitis Prevention and Control

- 2010 World Health Assembly adopted resolution 63.18 as sponsored by Brazil, Columbia, and Indonesia calling for comprehensive approach to hepatitis prevention and control
- World Hepatitis Day on July 28
- Member State action
- Secretariat action
- Accountability to World Health Assembly

Goals

- Using a public health approach, the goal of the viral hepatitis programme is:
 - to reduce the transmission of the various agents that cause viral hepatitis;
 - to reduce the morbidity and mortality due to viral hepatitis and improve the care of patients with viral hepatitis;
 - and to reduce the socio-economic impact of viral hepatitis at individual, community and population levels.

Global Hepatitis Strategy

WHO products (Attribution)		In country results (Contribution)		
Strategic axis	WHO products	Country basic operational framework		Outcome/ impact
		Plans	Results	
1. Partnership, mobilization and communication	Support for World Hepatitis Day	Hepatitis Day action	- High awareness - Absence of discrimination	- Reduced rates of new infections - Reduced fulminant hepatitis mortality
	Network of collaborating centres	Centres of excellence		
	Civil society collaborations	National patient group		
	Resource mobilization strategy	Funded national plan		
	External communication strategy	IEC strategy		
2. Data for policy and action	Disease burden estimates	Burden estimates	- Evidence based, cost-effective policy and plans	- Improved quality of life for patients with chronic hepatitis
	Impact assessment tools	National sero-survey (s)		
	Surveillance and outbreak investigation standards	Sentinel surveillance sites		
	Country profiles	Coordination cell at MoH		
	Research agenda	National research agenda		
3. Prevention of transmission	Guidance and tools for immunization for A, B and E	EPI schedule and SOPs	- Immunization coverage increased - Safe health care - Safe sex - Harm reduction	- Reduced mortality from cirrhosis and HCC*
	Safe health care standards and tools	BBV ^T prevention plans		
	Harm reduction tools for injection drug users	IDU care programme		
	Safe food and water strategies	Food and water safety		
	Safe sexual practice guidance	Health promotion		
4. Screening, care and treatment	Screening and counseling resource package	National screening plans	- Infected patients identified, care provided and treated	
	Diagnostic standards	Lab SOPs and network		
	Care and treatment guidelines for B and C	National care policy / plans		
	Training package for health care providers	National curriculum		
	Equity in access to treatment and drugs	Essential medicines in list		



Axis 1: Partnerships, resource mobilization and communication

- Support for World Hepatitis Day
- Global network of collaborating centres and civil society for viral hepatitis prevention and control
- Resource mobilization strategy
- External communication strategy

World Hepatitis Day

28 July

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



www.worldhepatitiseday.info

This is hepatitis



WOL HEPATITIS DEI 28 JULAE

KATEM
HEPATITIS B LONG 2012

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



MOH



WHO



Axis 1: Partnerships, resource mobilization and communication

- Support for World Hepatitis Day
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Occupational health

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Network of WHO Collaborating Centres in Occupational Health

This 2009 – 2012 Workplan represents the contribution of the WHO Global Network of Collaborating Centres in Occupational Health to assist countries to implement World Health Assembly Resolution 60.26: the Global Plan of Action on Workers' Health 2008-2017

[World Health Assembly Resolution 60.26: the Global Plan of Action on Workers' Health 2008-2017](#)

The 2009-2012 Workplan is organized into 5 objectives, reflecting those of the Global Plan of Action, and is further subdivided into 15 priorities. Four documents constitute the full Workplan:

Global workplan of the Collaborating Centres in Occupational Health for 2009-2012 (FINAL Edition September 30, 2011)

Global Workplan 2009-2012

8th Global Meeting of the WHO Collaborating Centres on Occupational Health

Contact us

More information on contacts:

Occupational health newsletter

GOHNET (Global Occupational Health) Newsletter

NEW!! GOHNET 18 - Workers' health: ongoing activities

More information on newsletter:

Join GOHNET

[Online survey](#)

Just published

Gender, Work and Health (2011)

[Link to web page](#)



Axis 1: Partnerships, resource mobilization and communication

- Support for World Hepatitis Day
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Prevention & Control of
Viral Hepatitis Infection:
A Strategy for Global Action



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Axis 2: Data for policy and action

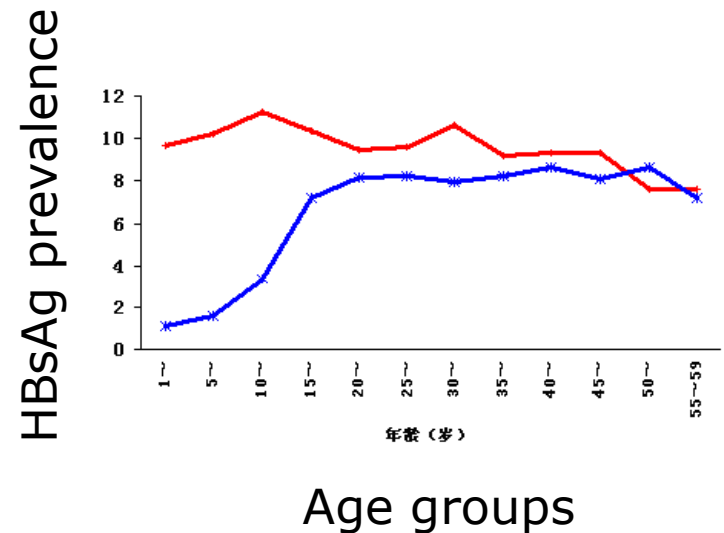
- Disease burden estimates
- Impact assessment tools
- Surveillance and outbreak investigation standards
- Country profiles
- Research agenda

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HepB Impact Assessment

- WHO/IVB/11.08.
Documenting the Impact of Hepatitis B Immunization: best practices for conducting a serosurvey.
- Sample Design and Procedures for Hepatitis B Immunization Surveys: A Companion to the WHO Cluster Survey Reference Manual



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Global Health Observatory Data Repository

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- World Health Statistics
- Environmental health
- Epidemic prone diseases
- Equity
- Global Information System on Alcohol and Health
- Health-related Millennium Development Goals
- Health systems
- HIV/AIDS
 - Data on the size of the epidemic
 - Number of people (all ages) living with HIV
 - Number of adults, women and children living with HIV
 - Prevalence of HIV among adults aged 15 to 49 (%)

--- Filter --- Export

Data on the size of the epidemic, Number of people (all ages) living with HIV

Location	Number of people (all ages) living with HIV ⁱ			
	2009	2008	2007	2006
Algeria	18000 [13000 - 24000]	16000 [12000 - 22000]	15000 [11000 - 20000]	
Angola	200000 [160000 - 250000]	190000 [150000 - 240000]	180000 [150000 - 230000]	180
Argentina	110000 [88000 - 140000]	110000 [86000 - 140000]	110000 [84000 - 130000]	10
Armenia	1900 [1500 - 2400]	1800 [1400 - 2200]	1700 [1400 - 2100]	
Australia	20000 [15000 - 25000]	19000 [15000 - 24000]	18000 [14000 - 23000]	
Austria	15000 [12000 - 20000]	14000 [11000 - 18000]	13000 [9700 - 16000]	
Azerbaijan	3600 [2600 - 5200]	3200 [2400 - 4400]	2800 [2100 - 3700]	
Bahamas	6600 [2600 - 11000]	6500 [2700 - 11000]	6300 [2800 - 10000]	
Bangladesh	6300 [5200 - 8300]	5100 [4300 - 6300]	4200 [3100 - 5200]	
Barbados	2100 [1800 - 2500]	2000 [1700 - 2400]	1800 [1600 - 2200]	
Belarus	17000 [13000 - 20000]	16000 [13000 - 19000]	15000 [12000 - 18000]	
Belgium	14000 [11000 - 18000]	14000 [11000 - 18000]	14000 [11000 - 18000]	
Belize	4900 [4000 - 5700]	4700 [3900 - 5500]	4600 [3800 - 5300]	
Benin	60000 [52000 - 69000]	58000 [51000 - 67000]	57000 [49000 - 65000]	

Axis 2: Data for policy and action

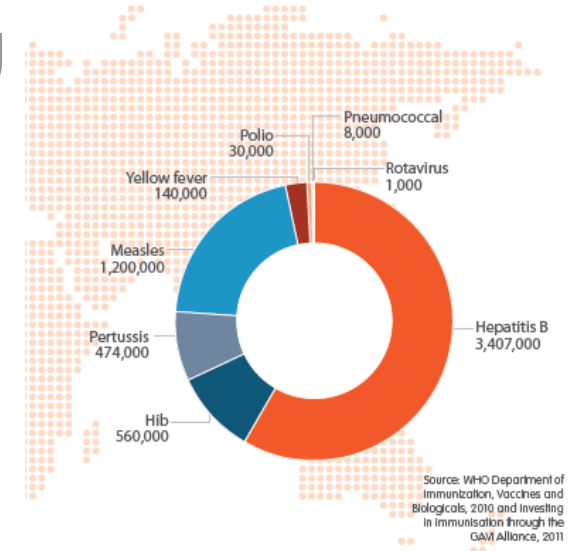
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Axis 3: Prevention of virus transmission

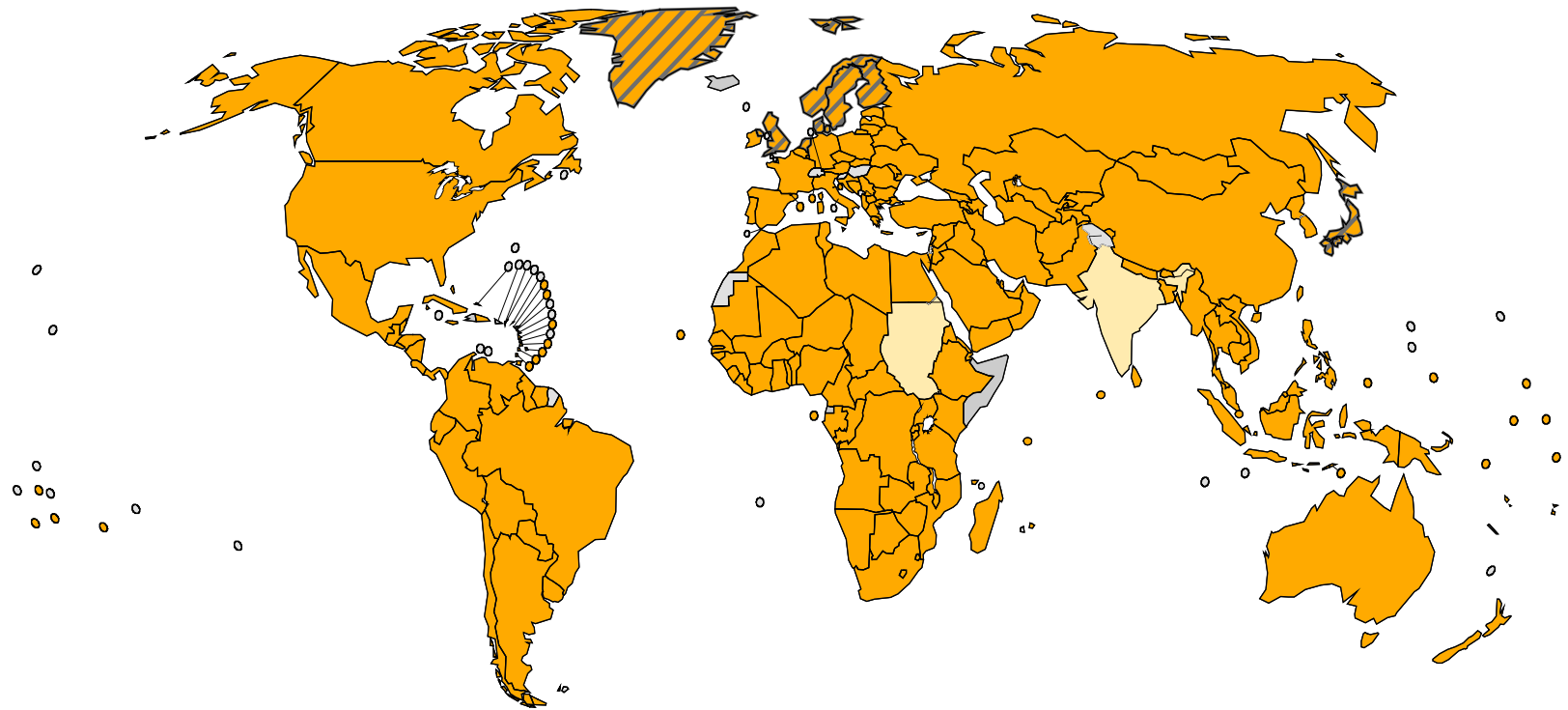
- Guidance and tools for immunization
- Safe health care standards and tools
- Harm reduction tools for injection drug users
- Safe food and water strategies
- Safe sexual practice guidance



Hepatitis B infant immunization:
A well accepted strategy that works!

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



Countries Using HepB Vaccine in National Immunization Schedule, 2010

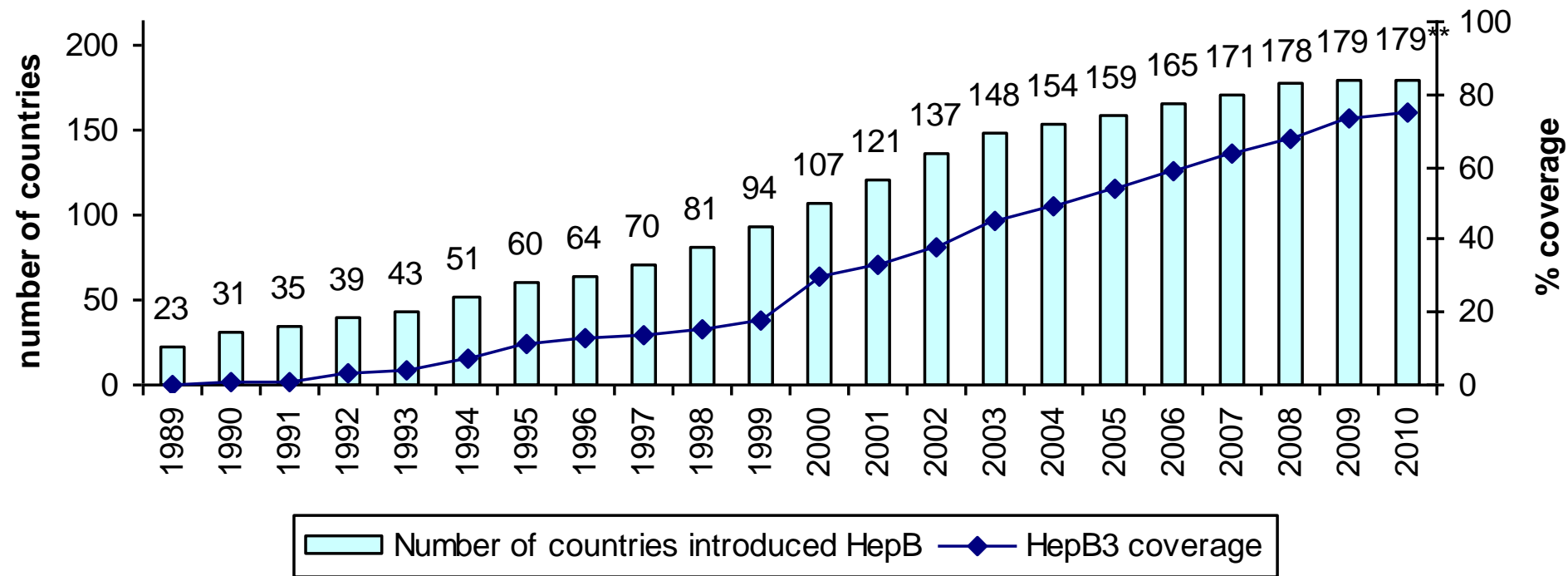


-  No (7 countries [of which 3 given at adolescence] or 4%)
-  Yes (177 countries or 92%)
-  Yes (Part of the country) (2 countries or 1%)
-  Yes (Risk groups) (7 countries or 4%)

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement. © WHO 2011. All rights reserved.

Source: WHO/IVB database, 193 WHO Member States. Data as of September 2011. Date of slide: 21 September 2011

Country introduction HepB* and global infant HepB3 coverage, 1989-2010

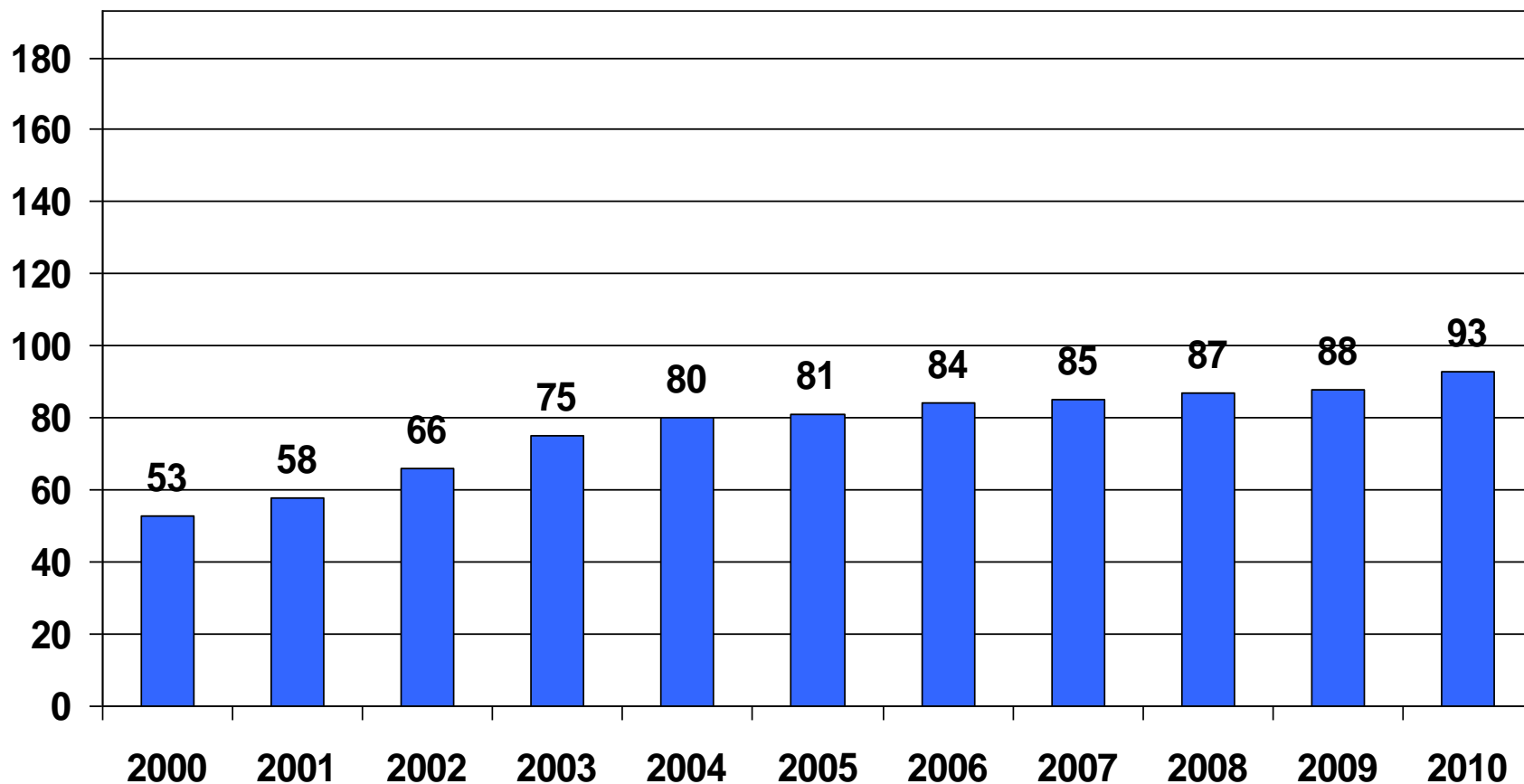


Source: WHO/UNICEF coverage estimates 2010 revision. July 2011; and IVB Database, 193 WHO Member States. Date of slide: 2 August 2011

* Year of introduction can be the year of partial introduction

** Includes India and the Sudan with partial introduction excluding 3 countries where HepB administered for adolescence

Number of WHO Member States introduced HepB Birth Dose



Source IVB Database, 193 WHO Member States.

Date of slide: 02 August 2011
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Perinatal Prevention of HBV Infection

- 2009 Policy: All infants should receive HepB within 24 hours of birth
- HepB_BD should be a quality measure of immunization programmes
- Best practices and needs for the delivery and monitoring of the hepatitis B vaccine birth dose
- Estimating the Costs of Scaling up Hepatitis B Birth Dose Immunization Globally
- WHO/UNICEF best estimates of HepB_BD

Axis 3: Prevention of virus transmission

- Guidance and tools for immunization for A, B and E
- Safe health care standards and tools
- Harm reduction tools for injection drug users
- Safe food and water strategies
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Safe health care standards and tools

- Safe blood and blood products
- Decreased demand for injections
- Safe injections in curative sector
- Patient safety
- Safe medical waste disposal

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Axis 4: Screening, care and treatment

- Screening and counseling resource package
- Diagnostic, care and treatment guidelines in resource-constrained settings
- Training package for health care providers
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Further Impact

- WHO Regional Action Governance actions
- UNAIDS High-Level Meeting prioritized viral hepatitis
- UN GA High-level Meeting on Prevention & Control of NCDs
 - Hepatitis B vaccinations, best buys for population-wide interventions
 - Promote increased access to HepB
- Millenium Development Goals: inclusion of HBV/HCV infections

Viral Hepatitis Goals in Regions

- Western Pacific: RC goal (2005) reduce HBsAg prevalence to <2% among less than 5 yr old children by 2012
- Eastern Mediterranean: RC goal (2009) reduce prevalence of chronic HBV infection to <1% among children >5 years by 2015 and address HCV prevention and control.
- Africa: Technical Advisory Group on Hepatitis met Mauritius in 2010, resolution for comprehensive control for consideration by Regional Committee in 2012

Viral Hepatitis Goals in Regions

- Americas: Immunization TAG agreed to consider elimination of HBV transmission in context of broader viral hepatitis control.
- South-East Asia: Viral Hepatitis Technical Advisory Group met in 2011 and developed comprehensive strategy for consideration by Regional Committee
- Europe: Commitment to formulate a regional strategy in 2012.

Challenges

- Translate political will into action
- Fully staff WHO HQ team
- Fully fund WHO workplan
- Establish functional global hepatitis network
- Translate HQ strategy at regional and national level
- Integrate viral hepatitis in MDGs
- Decrease transmission and impact of VH infection

Thanks

