

# A FUTURE FREE OF HEPATITIS

Relevant for: Developmental Issues | Topic: Health & Sanitation and related issues

About 95% of all hepatitis-related deaths are due to cirrhosis and liver cancers caused by the hepatitis B and C virus. | Photo Credit: Getty Images

On this [World Hepatitis Day](#), the World Health Organization (WHO) is highlighting the need to bring hepatitis care closer to the people in need. This means making hepatitis care available, affordable and accessible to all without discrimination. This is crucial in the quest to eliminate viral hepatitis as a public health threat by 2030, a global target. Elimination would translate to 90% reduction in incidence and 65% reduction in mortality by 2030, compared to the corresponding figures of 2015.

The action against hepatitis cannot wait any longer. Why is that? First, hepatitis is the only communicable disease where mortality is showing an increasing trend. Globally, approximately 354 million people are suffering from hepatitis B and C. Southeast Asia has 20% of the global morbidity burden of hepatitis. About 95% of all hepatitis-related deaths are due to cirrhosis and liver cancers caused by the hepatitis B and C virus.

Second, viral hepatitis is preventable. Clean food and good personal hygiene, along with access to safe water and sanitation, can protect us from hepatitis A and E. Measures to prevent hepatitis B and C need to focus on full coverage with hepatitis B immunisation including a birth dose, as well as access to safe blood, safe sex and safe needle usage.

Third, a world free of hepatitis is practical and feasible. We have the tools to diagnose, treat, prevent and therefore eliminate chronic viral hepatitis. Safe and effective vaccines exist to prevent hepatitis B, alongside new and powerful antiviral drugs that can manage chronic hepatitis B and cure most cases of hepatitis C. These interventions together with early diagnosis and awareness campaigns have the potential to prevent 4.5 million premature deaths in low- and middle-income countries by 2030 globally.

However, access to these services are often out of reach for communities as they are usually available at centralised/specialised hospitals at a cost which cannot be afforded by all. People continue to die because of late diagnosis or lack of appropriate treatment. Early diagnosis is the gateway for both prevention and successful treatment.

Modest testing and treatment coverage is the most important gap to be addressed. If we look at the treatment cascade of the Southeast Asia region, only about 10% of people with hepatitis know their status; and of them, only 5% are on treatment. Of the estimated 10.5 million people with hepatitis C, just 7% know their status, of which around one in five are on treatment. This gap needs to be patched up. This is what this year's World Hepatitis Day campaign is all about.

Amid all the challenges, the region has continued to implement key interventions to prevent, detect and treat hepatitis. Since 2016, when the region launched its Action Plan for viral hepatitis 2016–2021, nine countries have achieved more than 90% coverage of the third dose of hepatitis B vaccine. Four countries have achieved the hepatitis B control target of less than 1% seroprevalence among children over five years of age.

En route to the 2030 target of eliminating hepatitis, there are some transitional targets to be achieved. By 2025, we must reduce new infections of hepatitis B and C by half, reduce deaths from liver cancer by 40%, ensure that 60% of people living with hepatitis B and C are diagnosed

and that half of those eligible receive appropriate treatment. This can only be achieved if hepatitis care reaches the community. Several priorities must be addressed for this. These include the need to enhance political commitment across all countries of the region and ensure sustained domestic funding for hepatitis; improve access to drugs and diagnostics by further reducing prices; develop communication strategies to increase awareness; and innovate service delivery to maximise the use of differentiated and people-centred service delivery options across HIV, viral hepatitis and STIs to tailor and deliver services according to people's needs and preferences in line with the primary healthcare approach. Decentralising hepatitis care to peripheral health facilities, community-based venues and locations beyond hospital sites brings care nearer to patients' homes.

For the first time, an integrated Regional Action Plan for viral hepatitis, HIV and STIs 2022–2026 is being developed by WHO. This will ensure effective and efficient utilisation of limited resources available for the region and will guide countries to adopt a person-centred approach rather than a disease-specific one.

As we observe World Hepatitis Day, we must act together with communities and all stakeholders for a future free of hepatitis. This will lay a firm foundation for a healthier, more equitable and more prosperous world.

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