As EU looks how to curb hepatitis propagation
UK provides an example, says new ranking of
30 countries

Brussels, November 6, 2012

Every year 125,000 Europeans die from various hepatitis-related diseases. Around Europe, there are 25 million people with hepatitis, most carrying the disease without knowing it. This makes them a high risk factor for spreading the infection. A new study now compares the treatments and policies of hepatitis in 30 European countries to locate the most successful examples for a pan-European best practice on hepatitis. Following on a top group of France, Slovenia, Germany, Sweden, Portugal and Italy, UK offers an example, says the study.

Viral hepatitis is a largely neglected epidemic in the Europe, though around 23 million people are estimated to live with chronic hepatitis B (HVB) and/or hepatitis C (HVC). This figure must be seen against a background of a very low detection rate of infected people. Even in countries with a national strategy, less than 40% are detected. In countries like UK and Germany the detection rate is 14 – 18%. In most other countries the rate ranges from 0.3% (Greece) to 3% (Poland). This means that millions of Europeans are still unaware of their hepatitis.

Effective action on hepatitis is not seen as a high priority by governments. The main exceptions are the UK (Scotland, and increasingly, England) and France. This means that a lot remains to be done also in many countries ranking high in the Hepatitis Index!

Around 14 million carry HVB, spread mainly by exposure to infected blood or body secretions (semen, vaginal discharge, breast milk and saliva).

Another 9 million are infected with HVC, mostly by needles shared among drug users. Before 1992, blood transfusions still had low safety and caused infections.

High risk groups for acquiring and spreading the disease are not only patients on blood dialysis, people using intravenous injections, children of infected mothers, professional sex workers, prison inmates and men having sex with men, but also healthcare staff and migrant populations. Especially HVB can exist without clear symptoms and the carrier is often unaware of the disease. This puts the general population at risk, making public awareness important. As chronic hepatitis is often left untreated, with less than 20% of the patients receiving treatment, it is a major cause of liver cirrhosis and primary liver cancer.
European hepatitis strategy will save lives

The Euro Hepatitis Index (EHepI), comparing disease policy and treatment among 30 European countries, was jointly presented today in Brussels by the European Liver Patient Association (ELPA; who have also been distributing press information about the Index) and the think tank Health Consumer Powerhouse (HCP). The study suggests a number of areas for improvement, forming a hepatitis strategy for Europe:

- Efficient hepatitis B vaccination programs.
- Easily available and free-of-charge screening programs for general population and for all risk groups.
- Awareness campaigns to support detection and reduce risk-behaviour among the general population and key groups of infection carriers.
- Access to treatment when required, not only to subsidized medication but personalized treatment as well, providing health education and social support.
- Qualified professionals to optimize the management of the disease according to best practice.
- National registries for proper data acquisition to analyze where to use available resources in the best way possible and to be able to detect and review areas for improvement.
- EU commitment to take on a leadership role in public health. National strategies are needed to coordinate the efforts in each member country.

UK has something to offer

The U.K is a country with relatively low prevalence of HVB and HVC infections. There are good prevention programmes, in spite of not including universal HVB vaccination at birth or during childhood because of a governmental concern that this may not be cost effective. Ongoing studies in Scotland with a new vaccine may change this in coming years.

Regarding hepatitis C, Scotland is ahead of other parts of the UK as Scotland already has a national HBC strategy, in common only with France, adds Dr. Beatriz Cebolla, the EHepI project manager. England and Wales are preparing a national strategy to be launched at the end of the year.

Further, UK guidelines include recommendations for vaccination of a large number of groups at risk. However, looking at the coverage it would seem that there is room to improve vaccination uptake as well as performance in case finding and screening. Neither screening
policies nor guidelines include all groups that are of relevance to control the disease. Access to treatment is good and the development of clinical networks and multidisciplinary teams has been essential to improve care delivery.

Following Index winner France, top performer such as Slovenia (827 points), Germany (797), Sweden (766), Portugal (765), Italy (752) and UK (750) all offer important examples. UK scores a 7th position.

EHepl, built from 27 indicators, covers the whole of the EU as well as Switzerland, Norway and Croatia.
The Index is produced by the Health Consumer Powerhouse Ltd, since 2004 measuring healthcare performance in 35 countries, taking a consumer position. The EHePI has been supported by an unrestricted grant from ELPA (European Liver Patient Association).

The full report, Index matrix, graphics and national media releases are available at www.healthpowerhouse.com

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