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First national hepatitis C report shows many Australians have been cured, but many more are missing out

The first national report on progress towards the elimination of hepatitis C virus in Australia highlights the great strides Australia has made towards hepatitis C elimination over the past two to three years, with over 70,000 Australians having accessed curative therapies known as direct acting antivirals (DAAs) by the end of 2018.

Hepatitis C is a significant public health issue in Australia, currently affecting over 160,000 people. Until direct-acting antivirals became available to all Medicare-eligible Australians with chronic hepatitis C infection on 1st March 2016, there was a growing number of people living with hepatitis C, a rising burden of liver disease, and increasing rates of liver cancer and premature deaths attributed to long-term hepatitis C infection.

Prepared by Burnet Institute and the Kirby Institute, the report highlights this is now changing with declining numbers of new hepatitis C infections occurring each year.

Key points from the report:

- Over 70 000 Australians have accessed DAAs, highly effective and curative hepatitis C treatments
- The uptake of treatment has been accompanied by declines in new hepatitis C infections
- There is declining hepatitis C incidence among people who inject drugs, HIV-positive gay and bisexual men and lower prevalence of infection among recent injectors suggesting early evidence of a treatment as prevention benefit
- Hepatitis C notification linked data also indicates a decline in advanced liver disease complications and liver-related deaths.

“Australia should be proud of the great progress we have made towards hepatitis C elimination. We are one of the few countries globally on track to achieve the WHO target of eliminating hepatitis C as a public health threat by 2030,” report contributor, Burnet Deputy Director, Professor Margaret Hellard AM, said.

“There are challenges ahead. In particular a further 140,000 Australians need treatment, many who may not know they are infected or that a highly effective cure exists. We need to get the message out to them.”

Hepatitis C is a blood borne virus. In Australia hepatitis C is mostly transmitted by the sharing of needles during injecting drug use.

“Anyone who has injected drugs recently or in the past is at risk of hepatitis C. Importantly these curative therapies are available for all Australians no matter how they got infected, including through injecting drug

use. We encourage people to have a conversation about hepatitis C, get tested, treated, and cured. Tell a friend or family member who may be at risk to do the same.”

A major strength of Australia’s response is the partnership approach, with key community organisations, government, the health sector and researchers working together to achieve elimination.

Report co-contributor, the Head of Kirby’s Viral Hepatitis and Clinical Research program, Professor Greg Dore, said this partnership approach is a key role to Australia’s response.

“Australia is one of the few countries in the world where hepatitis C treatment can be accessed in the primary health care setting and it is central to our progress,” Professor Dore said. “Australia’s approach involving GPs, nurses, pharmacists and peer workers is a great strength. It helps raise awareness about treatment and linking people to care.

“As well, care is taking place hand in hand with another key component of Australia’s hepatitis C response – prevention through harm reduction. It means for many people there can be a one stop shop – they can access clean needles and syringes and opioid substitution therapy to reduce their infection risk, but also, if infected, access testing and treatment so they can be cured of hepatitis C.”

While the report shows a strong uptake of HCV testing and treatment among people who inject drugs and HIV-positive gay and bisexual men attending particular clinics, it also reveals disparities in rural and regional Australia, and a lack of data on the uptake of treatments by priority populations including Aboriginal and Torres Strait Islanders, and prisoners.

Stigma and discrimination against these key populations also remains an issue in ensuring they access care. As well, there has been a slow-down in the uptake of testing and treatment overall in the past 12 months. These issues will be a focus of Australia’s efforts going forward.

The report was compiled from 23 separate sources across Australia, from publicly available datasets through to mathematical modelling to give an overview of progress towards hepatitis C elimination in Australia.

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