

Summit Conference Hepatitis B and Hepatitis C Brussels, 14-15 October 2010



Call to Action

October 15th, 2010

This Call to Action is endorsed by:

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Viral Hepatitis Prevention Board
European Centre for Monitoring of Drugs and Drug Addiction
European Association for the Study of the Liver
European Liver Patients Association
World Hepatitis Alliance
International Centre for Health, Migration and Development.



The Hepatitis B and Hepatitis C Summit Conference brings together a wide range of stakeholders united in their goal to encourage European and national leaders to devise effective policies and implement targeted actions to curb the occurrence of hepatitis B and C in Europe. The Conference commends previous work in the domain of hepatitis B and C and aims to build on these initiatives, in particular the 63rd World Health Assembly's resolution on Viral Hepatitis of May 2010, MEP Thomas Ulmer's Call to Action on Hepatitis B launched at the European Parliament in 2006, and the European Parliament's Written Declaration on Hepatitis C in 2007.¹

**The Steering Group of the Hepatitis B and Hepatitis C Summit Conference,
together with its partner associations, calls on the EU Member States and the
European Commission to:**

- 1. Improve awareness of the threat posed by Hepatitis B and Hepatitis C**
- 2. Integrate prevention programmes for Hepatitis B and Hepatitis C into existing public health frameworks**
- 3. Enhance surveillance for Hepatitis B and Hepatitis C across Europe**
- 4. Support the development and integration of cost-effective technologies and procedures for use in viral hepatitis prevention, control and management, including screening of high risk individuals according to scientific and epidemiological based evidence**
- 5. Ensure universal access to early counselling and treatment for persons infected with Hepatitis B or Hepatitis C**
- 6. Expand research resources for hepatitis B and hepatitis C.**

1. Improve awareness of the threat posed by Hepatitis B and Hepatitis C

- The message that Hepatitis B and C pose a significant threat to public health and are the leading cause of liver cancer must be continually reinforced to policymakers and to the general public.
- Innovative and sensitive public health campaigns are needed to ensure that individuals are made aware of the risks of Hepatitis B and C infection and transmission. At the same time, care should be taken to de-stigmatise viral hepatitis and encourage the social integration of people infected with Hepatitis B and C.

2. Integrate prevention programmes for Hepatitis B and Hepatitis C into existing public health frameworks

- Vaccination programmes against Hepatitis B should be integrated into routine health programmes in order to reach as many individuals as possible.
- At the same time, existing vaccination policies against Hepatitis B should be reassessed to ensure that they reflect current epidemiology and reach at-risk target groups.
- Hepatitis C testing and treatment of injecting drug users, amongst whom most current Hepatitis C transmission is occurring, should be considered a public health imperative and fully integrated into national substance misuse programmes.

3. Enhance surveillance for Hepatitis B and Hepatitis C across Europe

- Comprehensive and enhanced surveillance of Hepatitis B and C should be developed and implemented at the EU-level under the coordination of the European Centre for Disease Prevention and Control.
- National protocols for disease surveillance must be harmonised with the EU framework for hepatitis B and C surveillance, which may include chronic cases of Hepatitis B and C in order to convey the full burden that they pose.

4. Support the development and integration of cost-effective technologies and procedures for use in viral hepatitis prevention, control and management, including screening of high risk individuals according to scientific and epidemiological based evidence.

- Strengthen health systems in order to adequately provide local populations with the most cost-effective and affordable interventions in accordance with the local epidemiological situations.
- Screening of high risk individuals should be prioritized. Legal and ethical implications should be always considered.

5. Ensure universal access to early counselling and treatment for persons infected with Hepatitis B or Hepatitis C

- Currently available treatments are potentially curative, reducing mortality from cirrhosis and liver cancer.
- Universal and equal access to Hepatitis B and Hepatitis C counselling and possible therapy must be considered a priority across Europe for their public health impact to be reduced.
- Leadership from national governments is necessary to dispel the myth that Hepatitis B and C are untreatable, and to actively promote the availability and early use of effective treatments for affected individuals in accordance with European guidelines and treatment protocols.

6. Expand research resources for Hepatitis B and Hepatitis C

- National and EU-level research funding organisations are urged to allocate explicit funds towards research on the epidemiology, prevention and treatment of Hepatitis B and C.
- Liver disease, including Hepatitis B and C, should become a priority area for future research within the 7th and 8th Research Framework Programmes of the EU.

¹ Of particular note are:

- The 63rd World Health Assembly Resolution on Viral Hepatitis, adopted on 21 May 2010;
- MEP Thomas Ulmer's Call to Action on Hepatitis B launched at the European Parliament in 2006, and the European Parliament's Written Declaration on Hepatitis C requesting i.a. a Council Recommendation to promote screening for Hepatitis;
- The European Parliament Report of April 2010 on the European Commission's Communication on Action Against Cancer, which "Urges that... the prevention and control of diseases which can develop into cancer, for instance primary and secondary prevention of viral hepatitis and treatment where appropriate, should be addressed by the Cancer Partnership and in future EU initiatives, such as a revised Council recommendation on cancer screening";
- The inclusion of Hepatitis B and C in the surveillance and monitoring programmes of the European Centre for Disease Prevention and Control (ECDC) and the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA);
- Work currently undertaken by the European Association for Disease of the Liver (EASL), the European Liver Patient Association (ELPA), and the Viral Hepatitis Prevention Board (VHPB).