

## Factsheet 5

### Hepatitis: Call to Action

Why local clinics/hospitals should promote hepatitis testing

#### Why should free, confidential and voluntary hepatitis testing, including linkage to treatment and care, be a priority in your clinic/hospital?

- **Hepatitis** continues to be an **active epidemic across Europe**. An estimated **15 million people** are living with **hepatitis B** and **14 million are living with hepatitis C** in the WHO European Region\*<sup>1,2</sup>
- In **[insert country]**, approximately **[insert number]** people are living with hepatitis B and **[insert number]** with hepatitis C **[regional data can be found [here](#) at (p93 onwards)]**
- The **majority of people living with hepatitis C** in Europe are **unaware of their status**<sup>4</sup>
- **There are more new hepatitis infections and late diagnoses** when access to free, confidential and voluntary testing is **limited**
- **Adopting European hepatitis testing guidelines** and/or implementing national guidelines to offer free, confidential and voluntary hepatitis testing can reduce the long term economic burden of hepatitis

#### How you can make a difference in your clinic/hospital?

##### Clinic/Hospital check list

- Ensure you and your teams have up-to-date, accurate knowledge of hepatitis as a *preventable* and *treatable* disease
- **Reduce stigma** associated with hepatitis by communicating the benefits of testing and treatment advances with your staff, ensuring accurate information is subsequently shared with clients
- Put up posters in staff areas as a reminder for staff to offer to test for hepatitis whenever relevant
- Help ensure your teams are **trained, equipped, mandated** and **empowered** to offer hepatitis tests in the same way they would offer other routine tests

- New testing technology offers a variety of cost-effective rapid testing kits that are now available across Europe and should be used to improve access to testing.
- Help ensure your teams can effectively assess individuals for hepatitis testing by offering training on the risk-factors
- Ensure that hepatitis testing in your clinic/hospital is **confidential** and that this is upheld by staff at all times, with respect for the client
- Adopt hepatitis screening as **part of your routine care**, in high prevalence settings
- Ensure that a positive diagnosis **always means** that the patient is **linked to appropriate care and treatment**
- Further information please visit [www.testingweek.eu](http://www.testingweek.eu)

### \*Countries in the WHO European Region

**Western:** Andorra, Austria, Belgium, Denmark, Finland, France, Germany, Greece, Iceland, Ireland, Israel, Italy, Luxembourg, Malta, Monaco, Netherlands, Norway, Portugal, San Marino, Spain, Sweden, Switzerland, United Kingdom.

**Central:** Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Cyprus, Czech Republic, Hungary, the former Yugoslav Republic of Macedonia, Montenegro, Poland, Romania, Serbia, Slovakia, Slovenia, Turkey.

**Eastern:** Armenia, Azerbaijan, Belarus, Estonia, Georgia, Kazakhstan, Kyrgyzstan, Latvia, Lithuania, Moldova, Russia, Tajikistan, Turkmenistan, Ukraine, Uzbekistan.

### References

1. World Health Organization Regional Office for Europe. Hepatitis B in the WHO European Region: Factsheet – July 2019. Copenhagen: WHO; 2019.
2. World Health Organization Regional Office for Europe. Hepatitis C in the WHO European Region: Factsheet – July 2019. Copenhagen: WHO; 2019.
3. Hope, V. D., I. Eramova, D. Capurro, and M. C. Donoghoe. 2014. “Prevalence and Estimation of Hepatitis B and C Infections in the WHO European Region: A Review of Data Focusing on the Countries Outside the European Union and the European Free Trade Association.” *Epidemiology and Infection* 142 (02): 270–86.
4. Merkinaitė, Simon, Jeffrey V. Lazarus, and Charles Gore. 2008. “Addressing HCV Infection in Europe: Reported, Estimated and Undiagnosed Cases.” *Central European Journal of Public Health* 16 (3): 106.
5. Buti, María, Itziar Oyagüez, Virginia Lozano, and Miguel A. Casado. 2013. “Cost Effectiveness of First-Line Oral Antiviral Therapies for Chronic Hepatitis B : A Systematic Review.” *Pharmacoeconomics* 31 (1): 63–75.