

HIV and viral Hepatitis in Europe

Time to turn the tide

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HepHIV 2017 Conference: HIV and Viral Hepatitis:
Challenges of Timely Testing and Care
Malta, 31 January – 2 February 2017

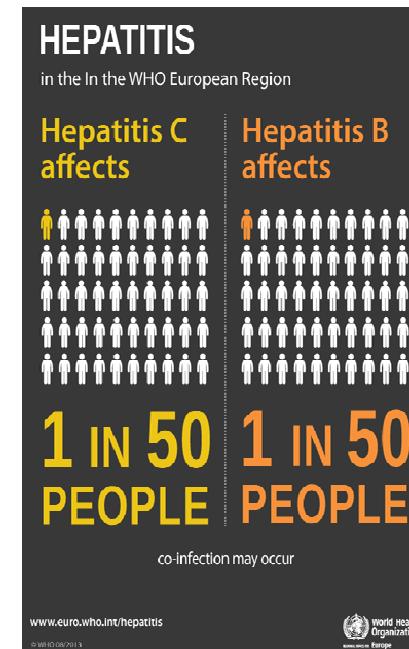
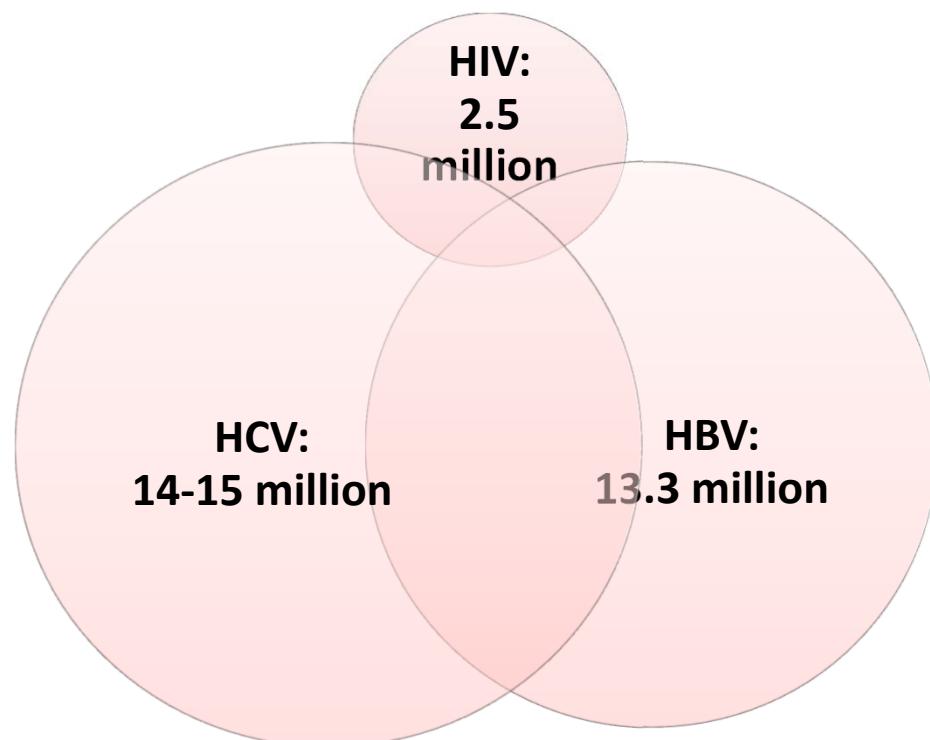


Outline

- HIV and viral hepatitis in the WHO European Region
- Action plan on the health sector response to HIV in the WHO European Region
- Key achievements and challenges
- New developments and opportunities
- Links to broader health agendas and next steps

HIV and Hepatitis disease burden in the WHO European Region

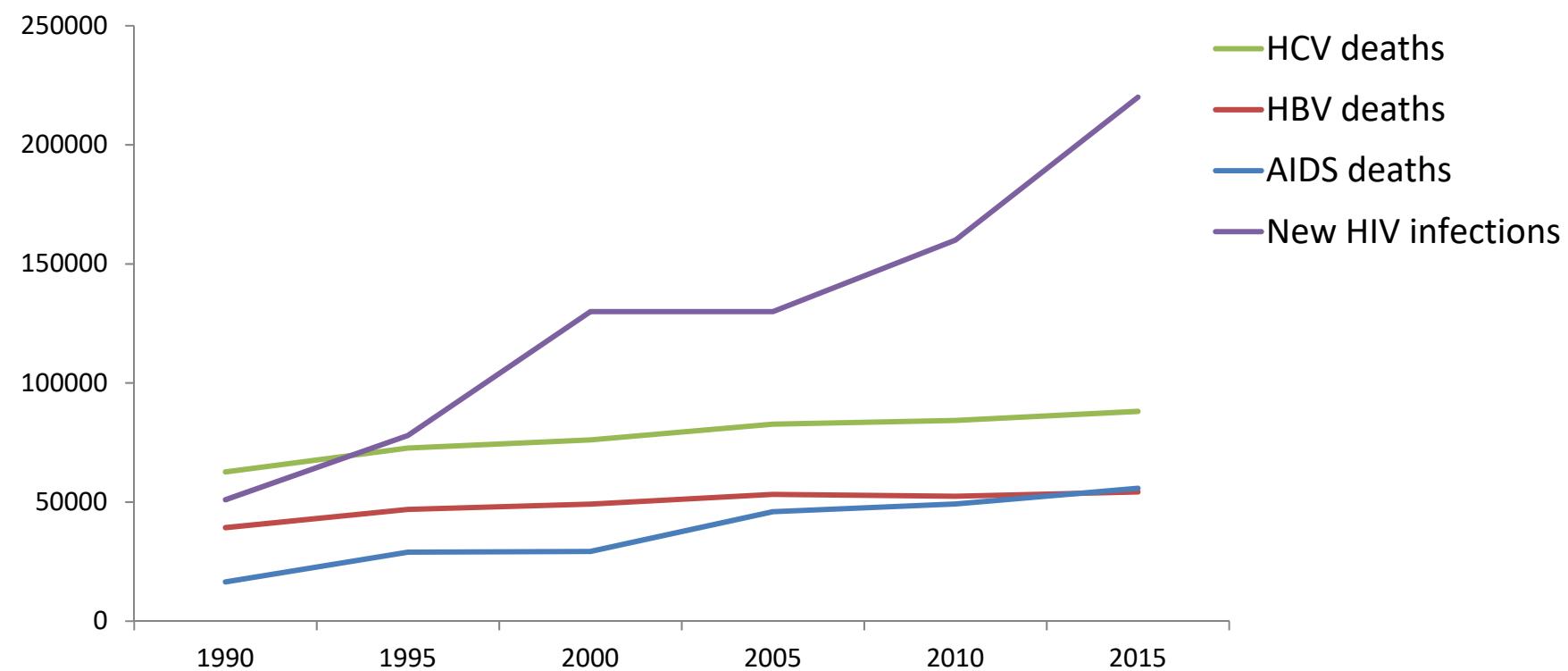
Estimated people living with HIV and chronic viral hepatitis B and hepatitis C infection, WHO European Region, 2015



Sources: Global Burden of Disease (2015). Institute for Health Metrics and Evaluation (online database: <http://www.healthdata.org/data-visualization/gbd-compare> (hepatitis) and UNAIDS global estimates (HIV).

HIV and Hepatitis mortality and HIV incidence trends in the WHO European Region

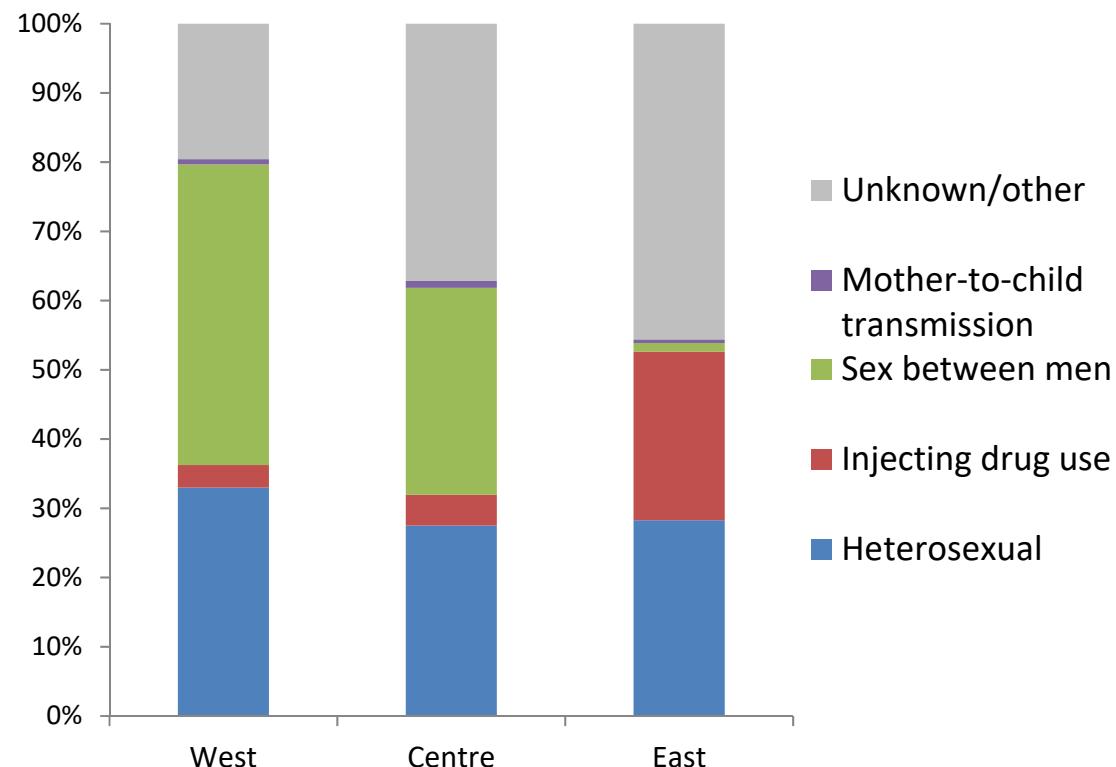
Estimated deaths due to hepatitis B and C and AIDS and estimated new HIV infections, WHO European Region, 1990-2015



Sources: Global Burden of Disease (2015), Institute for Health Metrics and Evaluation (online database: <http://www.healthdata.org/data-visualization/gbd-compare>) and UNAIDS global estimates.

Variation in reported HIV transmission modes across the WHO European Region

New HIV diagnoses by transmission mode, 2015



- **East:** injecting drug use
 - 45% of cases*
- **West and Centre:** sex between men
 - ~1/2 of cases*
- **Region:** heterosexual transmission
 - ~1/3 of cases*, some migration related
- **Region:** low MTCT transmission
 - <1% of cases*

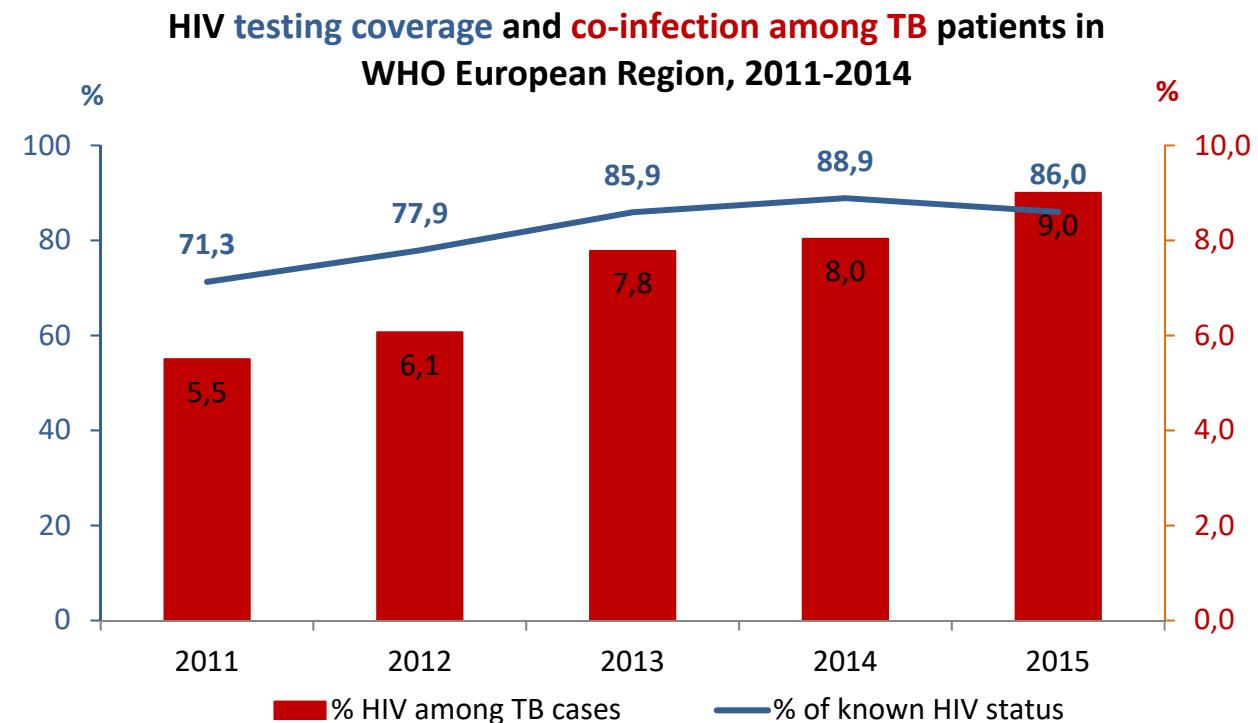
* with a known transmission mode



HIV co-infection among TB patients continues to rise in Europe, 2015

HIV and TB create a deadly synergy

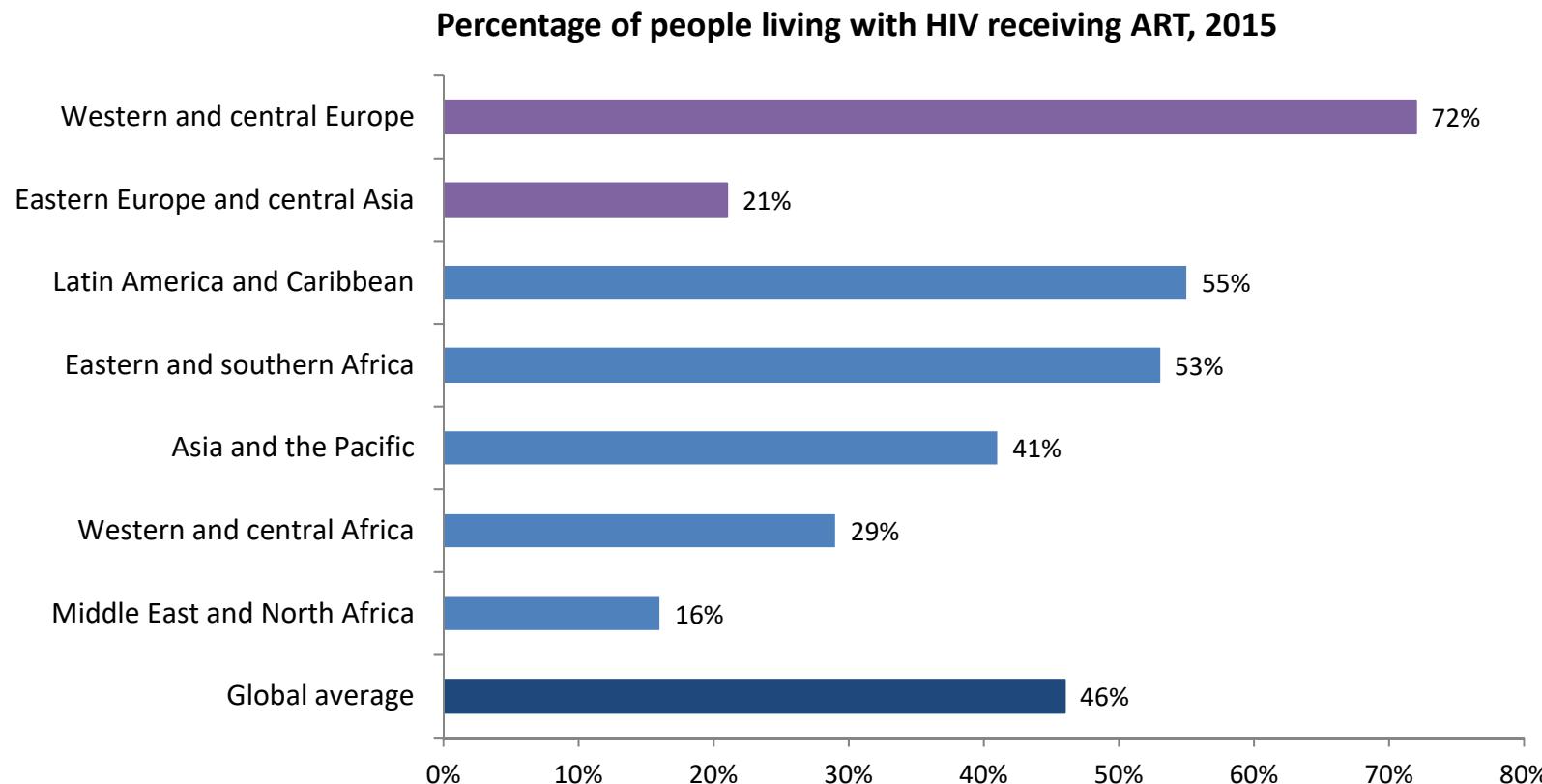
Between 2011 and 2015, HIV/TB co-infection almost **doubled**, from **5.5%** to **9.0%**



Source: European Centre for Disease Prevention and Control/WHO Regional Office for Europe. Tuberculosis surveillance and monitoring in Europe 2017.



Antiretroviral therapy (ART) coverage remains far below global average in eastern Europe and central Asia



Source: UNAIDS/WHO estimates 2016



Global strategy addressing SDG 3 & specific Sub-Goals

OVERARCHING HEALTH GOAL

Ensure healthy lives and promote well-being for all at all ages (SDG 3)

HEALTH SUB-GOALS:



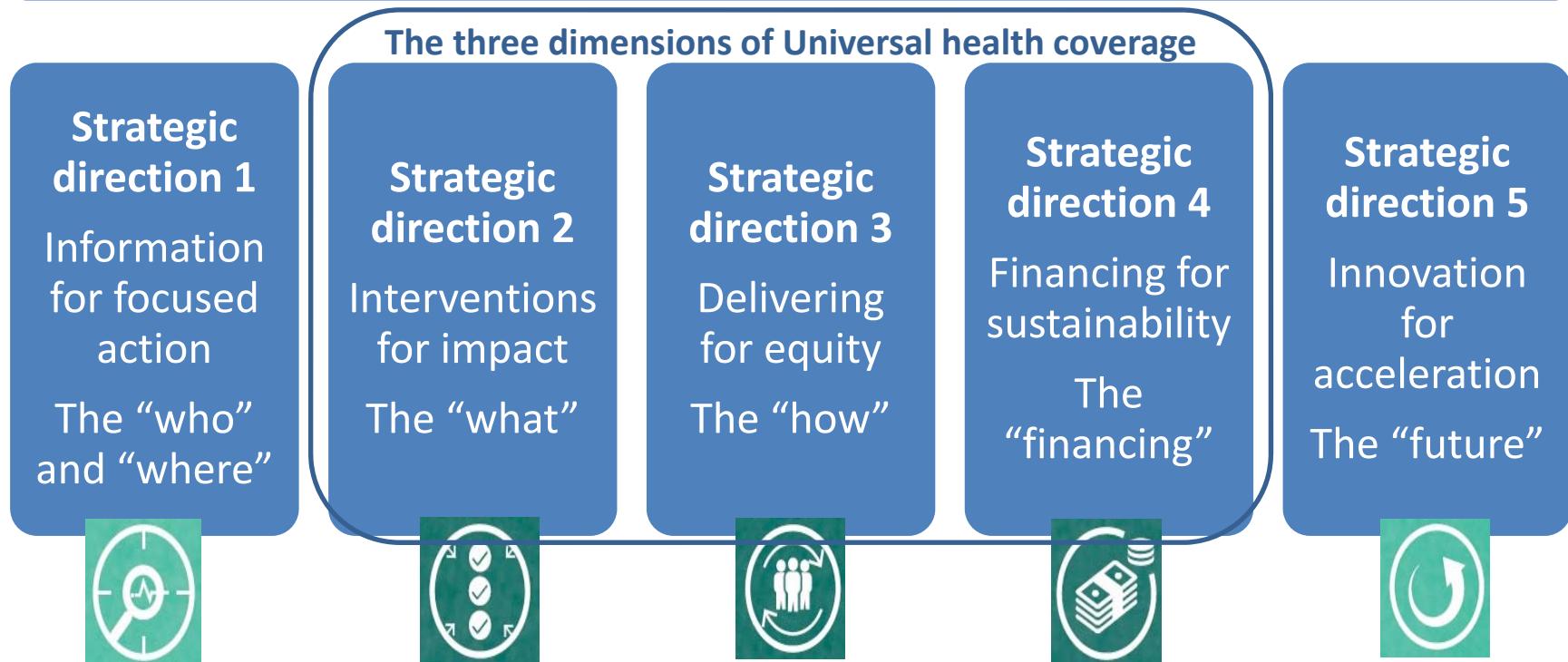
- Reduce child and neonatal mortality
- End epidemics of AIDS, TB, malaria and NTDs and combat hepatitis and other communicable diseases
- Reduce NCDs
- Sexual and reproductive health
- Universal Health Coverage including financial risk protection

Post-2015 strategic frameworks: aligned for impact



New action plans for the health sector response to HIV and viral hepatitis in the WHO European Region

Frameworks for action: Universal health coverage, the continuum of services, a public health approach



HIV and viral hepatitis in Europe: key challenges

- Lack of **national strategies** and **political commitment** in some countries
- Lack of **reliable data** on viral hepatitis
- Many people with HIV and hepatitis remain **unaware of their infection**
- **Late HIV diagnosis** and delayed **linkage to care and treatment** remains of considerable concern
- HIV **treat-all** approach **not implemented** in all countries
- **New treatments for viral hepatitis** widely unaccessible due to high costs
- Epidemic among **MSM in Europe** ongoing despite significant efforts in many countries
- Unequal access to **harm reduction** across the Region → growing epidemics among PWID in the East
- Continuing **structural barriers** (legislation, stigma and discrimination)
- **Cross-border collaboration** and information exchange to ensure uninterrupted access to services for all in need.

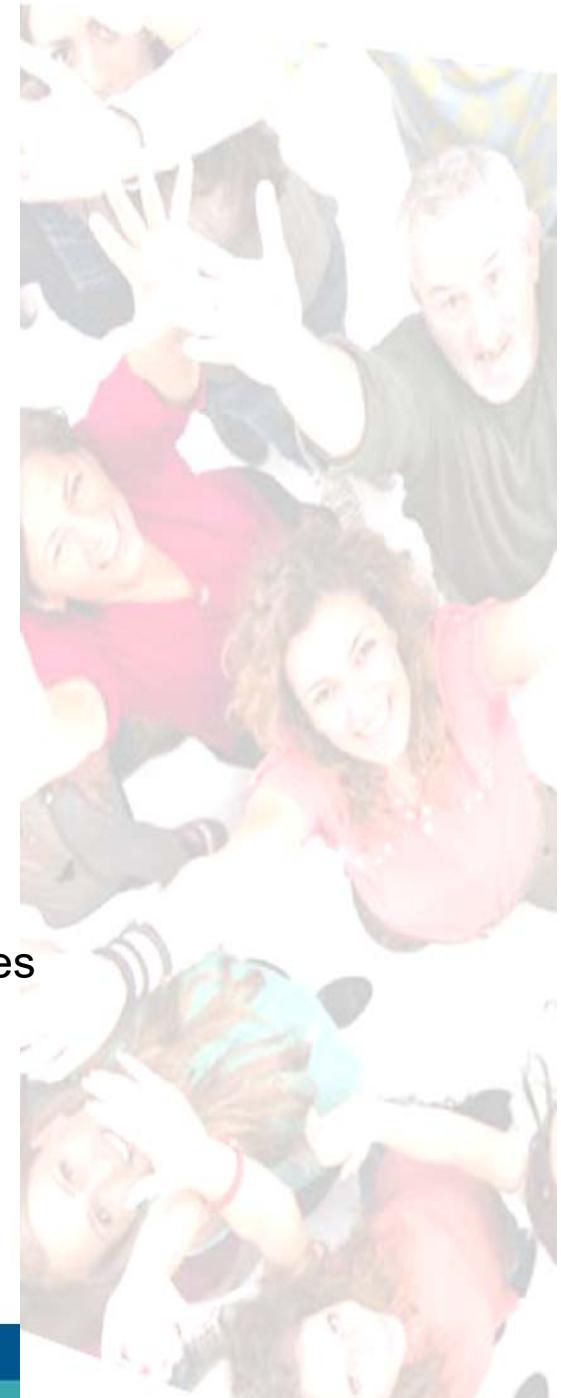


Towards ending AIDS in Europe

- Target the unreached – focus key populations
- Test early – treat all
- Implement comprehensive combination prevention
- Scale up integrated people-centred care and community involvement
- Foster innovation
- Ensure sustainability of national HIV programmes

Towards eliminating viral hepatitis

- Integrate hepatitis policies, services and interventions into broader health programmes
- Focus on treatment access, price reduction, rights, activism
- Scale-up integrated, people-centred, evidence based services through a public health approach
- Strengthen strategic information
- R&D and implementation science



Thank you very much for your attention

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