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HepHIV 2026 by EuroTEST
2-3 NOVEMBER · DUBLIN

Linkage to care for hepatitis B infection among migrant populations screened in Portugal

Preliminary data from the VH-COMSAVAC project

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BACKGROUND & OBJECTIVES

- Chronic viral hepatitis caused by hepatitis B and C virus represent a major public health burden[1]
- In 2024, there were an estimated 240 million people living with a chronic HBV infection (~2.9% of the global population) [1]
  - < 5% were on treatment
  - ~1.1 million people died from HBV-related cirrhosis and liver cancer
- The burden of chronic hepatitis B is heavily concentrated in specific geographic regions (WHO African Region and Western Pacific) [1]
- Across EU countries there are estimated 1.73 million migrants living with hepatitis B[2]
  - Portugal has the highest estimated prevalence of HBV among migrants (5.47%, about 61,600 migrants)[2]
  - Data on linkage to care on migrant population in Portugal remains limited

1 - Global hepatitis report 2026.
2 – Razavi-Shearer DM et al. Lancet Reg Health Eur. 2025 Sep 2.

BACKGROUND & OBJECTIVES

The Study: Viral Hepatitis COMmunity Screening, Vaccination, and Care (VH-COMSAVAC)

- Multi-country implementation project on community-based viral hepatitis screening, vaccination and linkage to care in priority populations
  - Promoted: Barcelona Institute for Global Health
  - Countries: Spain, Portugal, Greece, Italy
  - Evaluates the outcome of screen-and-link to care



OBJECTIVES

1. Assess preliminary HBV screening outcomes
2. Assess linkage to specialist care

Portuguese data

METHODS

- Cross-sectional screening and prospective follow-up

Population

African portuguese speaking countries (PALOP) born adults

Period

22 Jul 2025 – 30 Apr 2026

Settings

- Outreach (community setting by NGO GAT)
- Primary Healthcare Centre (PHC)

Lisbon Metropolitan Area

Rapid tests

HBV · HCV · HIV

HBV infection

HBsAg-reactive test or previously confirmed diagnosis

Linkage to care

Attended first specialist appointment (referred HBV infection)

- Approved by Ethics Committee of Lisbon Academic Medical Centre; all participants provided written informed consent

RESULTS

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SCREENING

1,051

PALOP-born participants screened

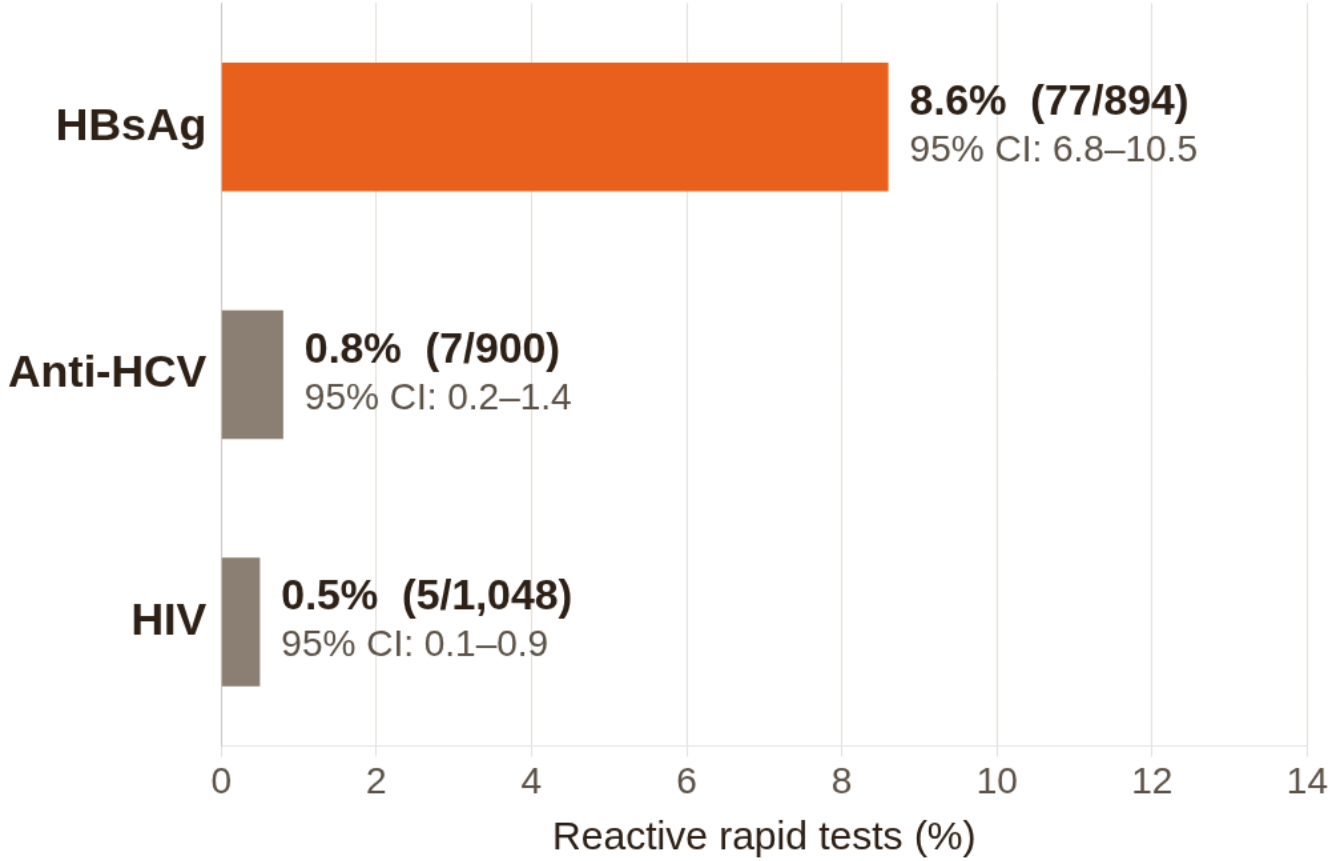
Screening setting



Community (N=865)

Primary care (N=186)

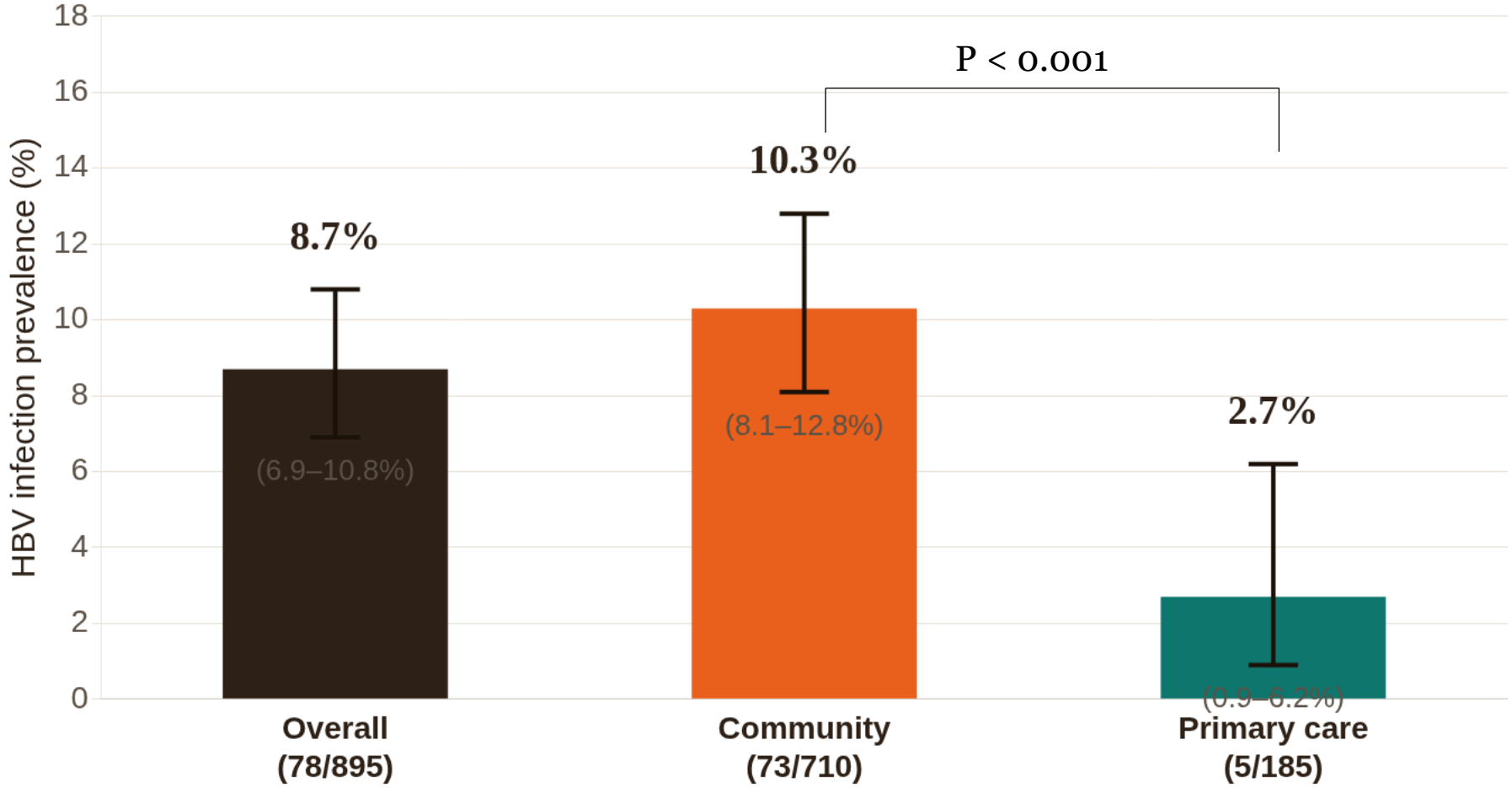
Reactive rapid tests — % (n/N) [95% CI]



RESULTS

HBV prevalence

- HBV overall prevalence: 8.7% (95% CI: 6.9–10.8)



RESULTS

HBV-POSITIVE PARTICIPANTS PROFILE(n = 78)

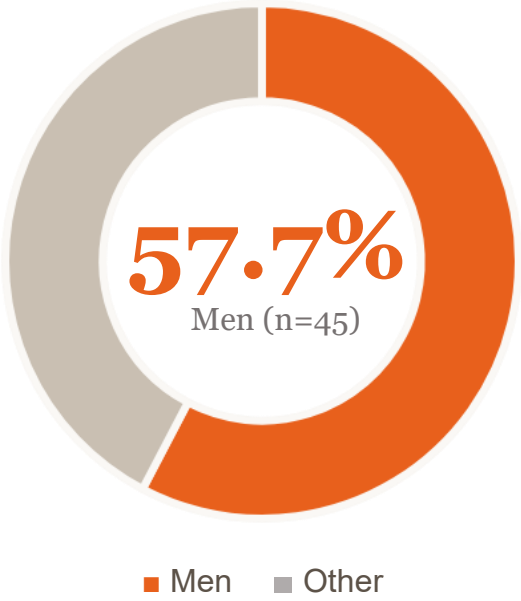
- Young, mostly male, recently arrived

32

Median age, years

18 — 60

IQR 27–42



2 years

Median time since arrival

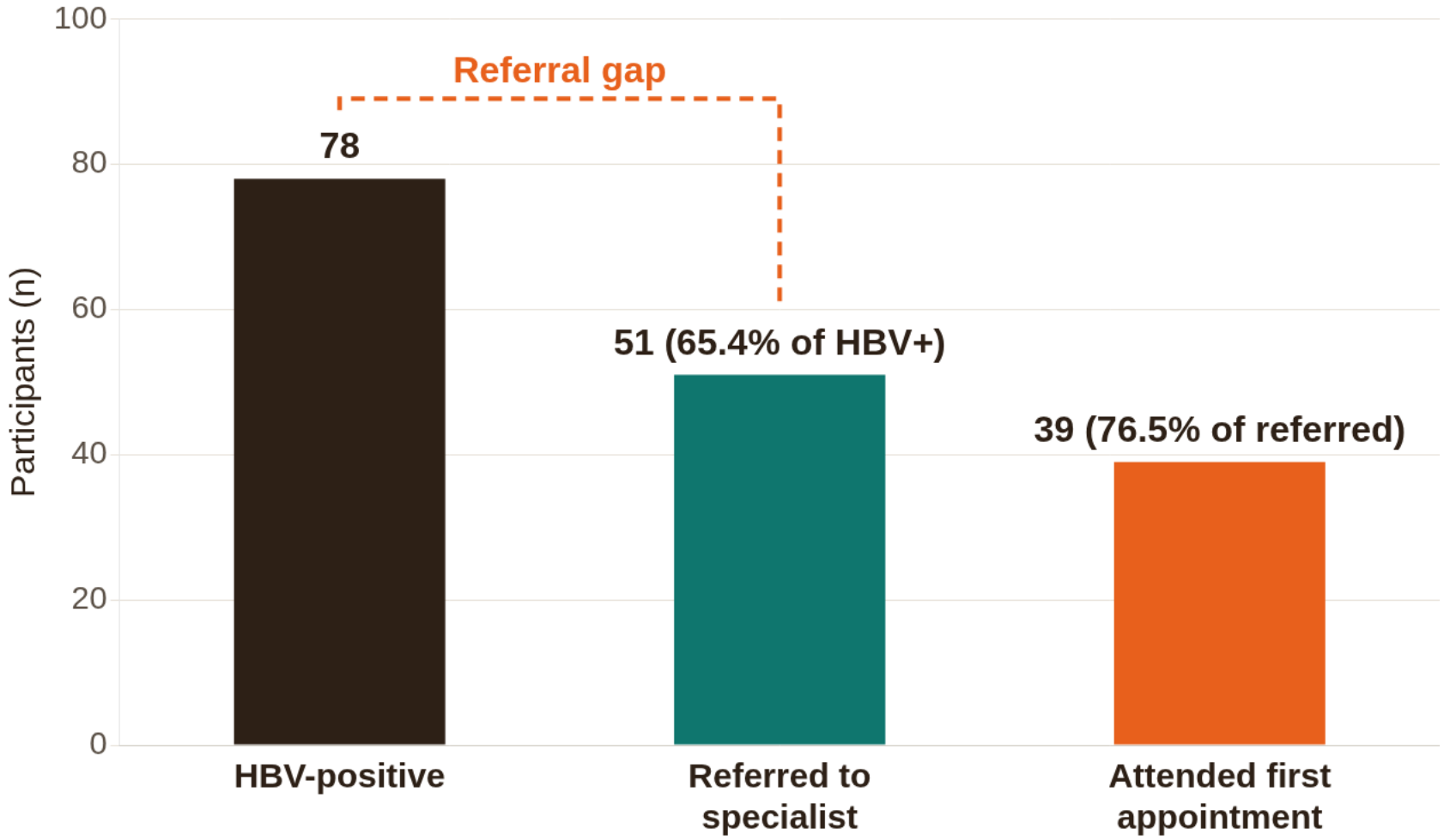
0 — 10 yrs

IQR 1–5.8

RESULTS

LINKAGE TO CARE

- There was a significant breakdown in the referral process



65.4%
referred (51/78)

Linkage to care 76.5%

81.3% attended, excl. 3 missing (39/48)

DISCUSSION

IMPLICATIONS

- Community NGO and PHC screening is effective in diagnosing migrants living with hepatitis B in Portugal
  - Prevalence was **4 times higher** in community settings than in primary care (10.3% vs 2.7%, $p<0.005$)
  - Young and recently arrived population have the opportunity to link to care
- Attendance to specialized care is high after referral
  - 76.5% of referred participants attended their first specialist appointment
  - There was **incomplete referral** after diagnosis
    - Undocumented migrants
    - Social barriers
    - High mobility
    - Preliminary data

CONCLUSIONS

- High prevalence of hepatitis B among African portuguese speaking countries (PALOP) born adults living the Lisbon metropolitan area (8.7%)
- Although the linkage to care is high, there is incomplete referral to specialized care
- There is the need to strengthen closed-loop referral pathways and systematic outcome monitoring

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Questions are welcome

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