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The opening of the 2021 HepHIV Conference marks a push toward further integrated strategies for the prevention, early testing and linkage to care for people with HIV, viral hepatitis and other infectious diseases in light of the COVID-19 pandemic.

More than 500 people gathered via a virtual conference platform for the seventh HepHIV2021 Conference to highlight European progress, challenges and way forward to ensuring early and integrated testing and care for people with HIV, viral hepatitis and other infectious diseases with a specific focus on the lessons learned from the COVID-19 pandemic.

With 54 abstracts representing 16 countries to be presented during the three-day event, the conference will feature the latest evidence from research and programmes, present lessons learned and suggest how to address the challenges ahead in Europe.

Since its inception in 2007, the biannual HepHIV conference is organised by the [EuroTEST \(formerly HIV in Europe\) initiative](#) and affiliated partners. Initially planned to be hosted in Lisbon, Portugal, the 2021 HepHIV conference is organized under the Auspice of the Portuguese Presidency of the Council of the EU, in collaboration with the EU funded Joint Action [INTEGRATE](#), and is [endorsed by](#) the European Commission and a number of European organisations, clinical societies and community networks.

The conference is also organised in close collaboration with the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and includes three dedicated sessions focusing on testing and care for people who use or inject drugs, including testing in prison settings.

Taking advantage of the virtual format, the 2021 HepHIV conference provides Russian simultaneous translation of all main sessions, offers free registration and on-demand access to all pre-recorded talks, thereby reaching participants who would not normally have been able to travel to the physical conference.

“We must continue to improve current efforts to reach those people who are still missing out on prevention, testing and care for HIV, hepatitis, STIs, TB and other infectious diseases as we pursue providing universal health coverage and progress toward the Sustainable Development Goals and the UNAIDS targets. To do this, patient voices must be meaningfully included and addressed in policy and decision-making processes, so we avoid replicating health models that do not work optimally” says Dr Ricardo Baptista Leite, HepHIV2021 Conference Co-chair, MP Portugal and founder of UNITE Global Parliamentarians Network.

“Portugal has achieved impressive progress toward the UNAIDS 95-95-95 targets for HIV, has provided universal access to Hepatitis C treatment and has several model examples in integration of prevention and testing for HIV, hepatitis, sexually transmitted infections and tuberculosis, particularly in terms of provision of people-centred services for people who inject drugs. Ensuring quality services are provided to all persons, particularly key populations, is essential in controlling these epidemics as public health threats” says Dr. Jürgen Rockstroh, HepHIV2021 Conference Co-

chair, Professor of Medicine and Head of the University of Bonn HIV Outpatient Clinic & EuroTEST Steering Committee Co-Chair.

The 2021 HepHIV Conference scientific programme showcases research and interventions throughout Europe that are effectively addressing multiple infectious diseases, sharing successful models of service adaptations developed to mitigate the impact of the COVID-19 pandemic and building of stronger systems and communities in light of lessons learned, thereby ensuring that more people are able to access timely prevention, testing and treatment.

“The data presented at the HepHIV2021 conference confirms that the COVID-19 pandemic has had considerable impact on testing for HIV, viral hepatitis, sexually transmitted infections and tuberculosis in Europe. However, many services have shown great flexibility and adapted positively to mitigate these challenges, and ongoing support from policy makers and stakeholders at all levels is key to maintain these services going forward. We cannot slow down now, or we risk jeopardising years of hard work to achieve our current progress” says Daniel Simões, HepHIV2021 Conference and EuroTEST Co-chair, Monitoring and Evaluation Manager at Coalition Plus and member of Grupo de Ativistas em Tratamentos.

To read more about EuroTEST, please visit www.eurotest.org

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Notes to editor

The content of this programme and press release represents the views of the HepHIV2021 Organising Committee and EuroTEST initiative and it is their sole responsibility; it can in no way be taken to reflect the views of the European Commission and/or the Executive Agency for Health and Consumers or any other body of the European Union. The European Commission and/or the Executive Agency do(es) not accept responsibility for any use that may be made of the information it contains.

Useful links

Conference website: <https://www.eurotest.org/Conferences/HepHIV-2021-Lisbon-Virtual-Conference>

Conference registration: <https://regonline.react-profile.org/profile/HIV21/HIV2021/en/login>

Key populations

EuroTEST focuses on populations that are at higher risk of HBV, HCV, HIV, STIs and TB. These groups include but are not limited to: men who have sex with men (MSM), migrants and mobile populations, sex workers, trans people, prisoners and people who use drugs.

The EuroTEST initiative

The EuroTEST (formerly HIV in Europe) initiative began in 2007 as way to bring attention to the importance of earlier diagnosis and care for people living with HIV. EuroTEST aims to utilise integrated strategies to help increase early detection and earlier entry into treatment, leading to better health outcomes and preventing the risk of further transmission. Although the initiative started with a focus on HIV, growing evidence has shown that HIV, hepatitis B and hepatitis C share the most prevailing modes of transmission and often affect the same key populations; therefore, the initiative made a concerted effort in 2013 to also prioritise viral hepatitis. In 2019, the initiative was renamed as EuroTEST and further broadened to also address STIs and TB. Since its initiation, EuroTEST has built a European platform where representatives from civil society, policy institutions, health care and European public health institutions work together toward influencing policy, sharing knowledge and building the evidence-base to support earlier diagnosis and care.

The situation in the WHO European Region

Although HIV infection is preventable, significant HIV transmission continues across the WHO European Region. In 2019, over 136 000 people were diagnosed HIV, including 79% in the eastern part of the Region, and over half (53%) being diagnosed at a late stage of infection¹, resulting in potential risk of onward transmission, poorer health outcomes due to delayed treatment and greater economic costs.

Viral hepatitis B (HBV) and C (HCV) also remain public health challenges in the WHO European Region with an estimated 15 million people living with chronic hepatitis B infection² and an estimated 14 million people with hepatitis C infection³. In the European Union/European Economic Area (EU/EEA), only an estimated 20.3% (2.4–71.8%) of persons with HBV and 26.8% (4.1–96.8%) of those with HCV are aware of their infection.⁴ Additionally, coinfection with viral hepatitis is common among people at risk of and living with HIV due to common modes of transmission, including condomless sex and sharing of injecting equipment.

Sexually transmitted infections (STIs) are a significant global burden. The incidence of STIs in Europe vary in age group and gender, however data has shown that young adults and MSM remain key vulnerable groups for STIs.

Tuberculosis (TB) predominantly affects vulnerable populations such as migrants, prison inmates or people co-infected with HIV. Despite important progress achieved in the response to the TB epidemic in the WHO European Region over the past decade, including the ongoing decline in incidence and mortality, TB and its drug-resistant forms still pose serious public health challenges, particularly in the eastern European part of the Region. An estimated 246 000 incident TB cases occurred in the WHO European Region in 2019, over 80% from countries in eastern and central Europe and eastern Europe is home to nine of the 30 countries globally with the highest burden of multidrug-resistant (MDR) TB.⁵

¹ European Centre for Disease Prevention and Control/WHO Regional Office for Europe. HIV/AIDS surveillance in Europe 2020 – 2019 data. Copenhagen: WHO Regional Office for Europe; 2020

² WHO Regional Office for Europe. Fact sheet on Hepatitis B in the WHO European Region. <https://www.euro.who.int/en/health-topics/communicable-diseases/hepatitis/data-and-statistics/fact-sheet-hepatitis-b-in-the-who-european-region-2019>

³ WHO Regional Office for Europe. Fact sheet on Hepatitis C in the WHO European Region. https://www.euro.who.int/__data/assets/pdf_file/0009/377253/Fact-Sheet-Hepatitis-C_2019_ENG.PDF

⁴ European Centre for Disease Prevention and Control (ECDC). Monitoring the responses to hepatitis B and C epidemics in EU/EEA Member States, 2019. Stockholm: ECDC; 2020. Available from: <https://www.ecdc.europa.eu/sites/default/files/documents/hepatitis-B-C-monitoring-responses-hepatitis-B-C-epidemics-EU-EEA-Member-States-2019.pdf>

⁵ European Centre for Disease Prevention and Control/WHO Regional Office for Europe. Tuberculosis surveillance and monitoring in Europe 2021 – 2019 data. Copenhagen: WHO Regional Office for Europe; 2021.