

Regional Action Plan for Viral Hepatitis in the Western Pacific 2016–2020



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A priority action plan for awareness, surveillance, prevention
and treatment of viral hepatitis in the Western Pacific Region

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ABBREVIATIONS

CTC	controlled temperature chain
EQAS	external quality assurance system
GHP	Global Hepatitis Programme
HAV	hepatitis A virus
HBsAg	hepatitis B surface antigen
HBV	hepatitis B virus
HCC	hepatocellular carcinoma
HCV	hepatitis C virus
HDV	hepatitis D virus
HEV	hepatitis E virus
IPC	infection prevention and control
NSP	needle-and-syringe programme
OST	opioid substitution therapy
PCR	polymerase chain reaction
PWID	people who inject drugs
QMS	quality management system
RED	Reaching Every District
STI	sexually transmitted infection
TB	tuberculosis
TRIPS	Trade-Related Aspects of Intellectual Property Rights
UHC	universal health coverage

FOREWORD

Viral hepatitis is the seventh-leading cause of mortality globally, responsible for 1.45 million deaths in 2013. One quarter of the world's population lives in the Western Pacific, but the Region bears 40% of the world's deaths caused by hepatitis. Hepatitis kills more than 1500 people every day in the Region.

Our work has been impressive: we have successfully reduced childhood transmission of hepatitis B through infant vaccination, with 30 out of 37 countries and areas having reached the 2012 milestone of less than 2% chronic hepatitis B prevalence among 5-year-old children and 13 countries and areas having already reached the goal of less than 1% prevalence. Millions of people will never face the ravages of hepatitis B as a consequence of these visionary decisions made 13 years ago, endorsing the ambitious goal at the fifty-fourth session of the WHO Regional Committee meeting in 2003.

Even with these successes, however, millions of people across the Region continue to live with chronic hepatitis infection and the risk of cirrhosis and liver cancer. We now need the same resolve to provide treatment for the millions of adults living with hepatitis B and C.

We now have effective medicines to manage and treat chronic viral hepatitis. However, the high prices of these medicines are a major barrier for access to treatment across our Region. We need innovative approaches to ensure that the people of our Region can benefit from these life-saving medicines.

As we work on these challenges, we must not forget the issue of stigma. The stigma of hepatitis can prevent many from taking employment or leading a normal life with normal relationships. Like most types of discrimination, stigma is curable with information and understanding. We must commit to reducing stigma as part of the fight against viral hepatitis.

The *Regional Action Plan for Viral Hepatitis in the Western Pacific 2016–2020*, approved by Member States at the sixty-sixth session of the WHO Regional Committee in 2015, provides a systematic approach to priority areas for action by countries to reduce the impact of viral hepatitis, with a focus on chronic hepatitis B beyond immunization and hepatitis C. It was developed through extensive Member State and expert consultations.

It is intended to guide Member States in developing country-specific national hepatitis responses based on the needs and priorities of people living with hepatitis or at risk for viral hepatitis, as well as the capacity of the national health sector to address these needs. Through implementation of this action plan, the Western Pacific Region may continue to lead global hepatitis action, addressing the challenge of eliminating new infections and restoring health to millions of people living with hepatitis.



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Regional Director

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