

BULGARIA

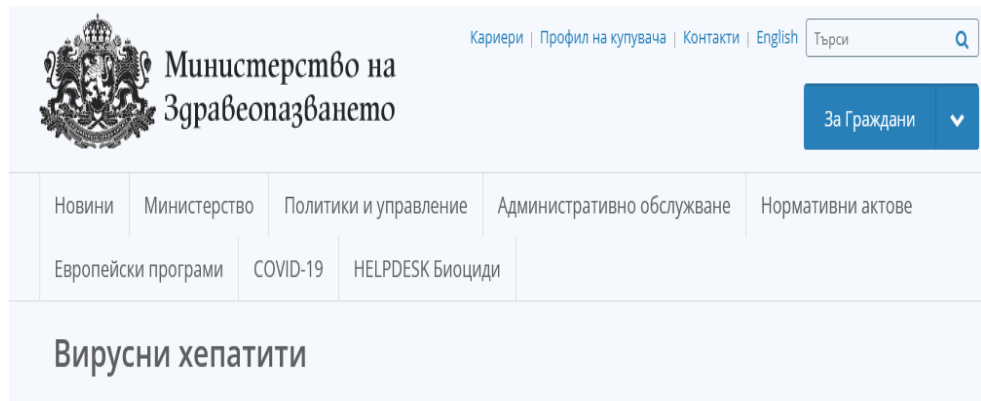
A.KEVORKYAN

**VHPB BALKAN
MEETING**
*LESSONS LEARNT, BEST
PRACTICES AND
FUTURE CHALLENGES*



National Program for the Prevention and Control of Viral Hepatitis in Bulgaria for the period 2021-2025

[HTTPS://WWW.MH.GOVERNMENT.BG/MEDIA/FILER_PUBLIC/2021/04/01/NP_HEPATITI_2021-2025.PDF](https://www.mh.government.bg/media/filer_public/2021/04/01/np_hepatiti_2021-2025.pdf)



Кариери | Профил на купувача | Контакти | English | Търси

Министерство на Здравеопазването

За Граждани

Новини	Министерство	Политики и управление	Административно обслужване	Нормативни актове
Европейски програми	COVID-19	HELPDESK	Биоциди	

Вирусни хепатити

[Начало](#) > [За граждани](#) > [Здравословен начин на живот](#) > [Профилактика на заразни заболявания](#)

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Заболяването хепатит

Хепатитът е възпаление, което често се причинява от вирус. От петте различни хепатитни вируси (А, В, С, D и Е), само В и С могат да хронифицират, причинявайки продължително заболяване. Хепатитите се разделят на остри (които продължават по-малко от 6 месеца) и хронични (които продължават по-дълго).

Взети заедно хепатит В и С представляват една от най-големите глобални заплахи за здравето, убивайки приблизително 1 милион души годишно. Изчислено е, че повече от 500 милиона души по света са заразени с хепатит В или С и един на всеки трима е бил изложен на инфектиране с единия или с двата вируса.

Пътища на предаване

Вирусът на хепатит В се предава при контакт със заразна кръв, както и с основните телесни течности, включително кръв, сперма, пот, сълзи, кърма. Вирусът на хепатит С се разпространява при директен контакт със заразна кръв. Може да бъде предаван и чрез други телесни течности, но много рядко. Много от заразените с хепатит В или С хора нямат симптоми на заболяване, но могат да предават вируса на други хора.

Най-честите пътища на разпространение са:

- Преливане на неизследвани кръв или кръвни продукти

[Профилактика на заразни заболявания](#)

[Варицела](#)

[Вирусни хепатити](#)

[Предпазване от грип](#)

[Туберкулоза](#)

[Информация за антибиотиците](#)

[Полезни връзки](#)

[Имунизационен календар](#)

[Актуално за граждани](#)

**НАЦИОНАЛНА ПРОГРАМА
ЗА ПРЕВЕНЦИЯ И КОНТРОЛ НА ВИРУСНИТЕ ХЕПАТИТИ В
РЕПУБЛИКА БЪЛГАРИЯ 2021 - 2025 г.**

On March 31, 2021, the Council of Ministers of the Republic of Bulgaria adopted a National Programme for the Prevention and Control of Viral Hepatitis in Bulgaria for the period 2021-2025.

The program is in line with the World Health Organization's Global Strategy for the Prevention and Control of Viral Hepatitis, the Action Plan to Combat Viral Hepatitis in the WHO European Region, and the Sustainable Development Goals.

STRUCTURES ENGAGED WITH THE IMPLEMENTATION OF THE PROGRAMME

- Medical facilities for inpatient and outpatient care:
 - Multi-profile hospitals for active treatment
 - Outpatient clinics for specialized outpatient medical care;
 - Outpatient clinics for primary outpatient medical care;
- National Center for Infectious and Parasitic Diseases (NCIPD);
- National Center of Public Health and Analyses (NCPHA);
- Regional Health Inspectorates (RHI);
- National Health Insurance Fund (NHIF);
- Ministry of Health;
- Ministry of Justice;
- Ministry of Labor and Social Policy;
- Non-governmental organizations and foundations with health and social goals;
- Civil associations.

MAIN STRATEGIC PRINCIPLES LAID DOWN IN THE NATIONAL PROGRAMME

- **Providing universal access to:**
 - prevention, diagnosis, treatment, care, and support for people with viral hepatitis;
- **Adherence to** a single national action framework and a single national monitoring and evaluation plan;
- **Observance of all international conventions on human rights**
- **Presence of strong political will, leadership, and responsibility of the government for the implementation of the National Program for Prevention and Control of Viral Hepatitis;**
- Active participation of the non-governmental sector
- Reducing and preventing the occurrence of new cases of viral hepatitis through specific interventions
- **Significantly increasing access and coverage of hepatitis B and C virus testing, especially for the highest-risk groups**
- **Ensuring adequate and regular funding of the National Program.**

OBJECTIVES OF THE NATIONAL PROGRAM

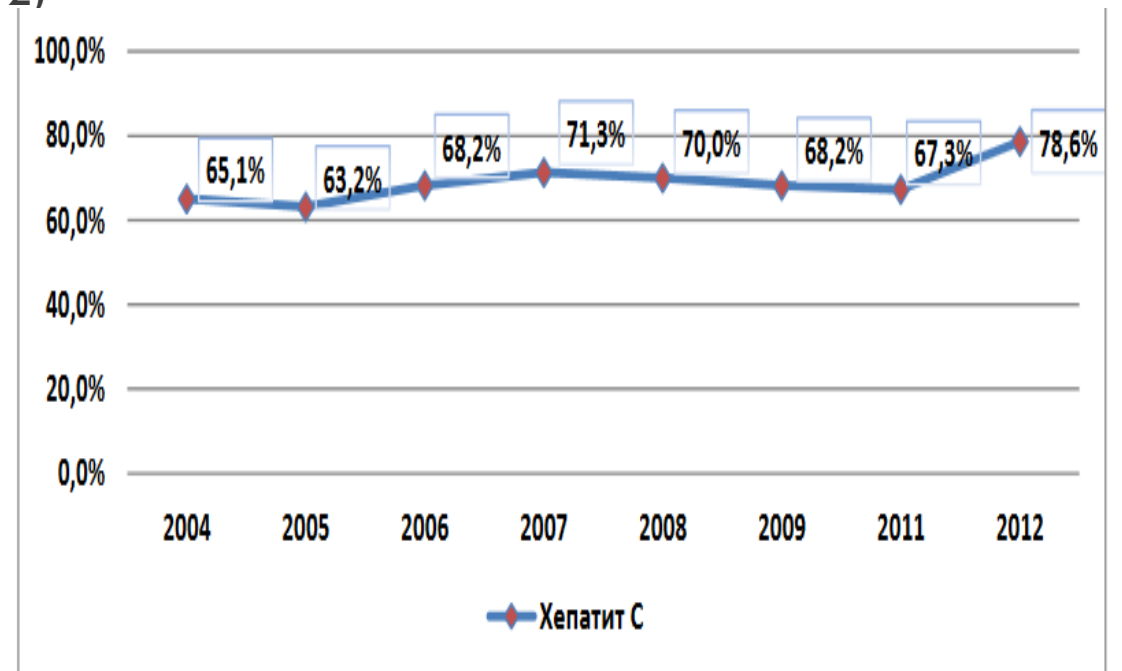
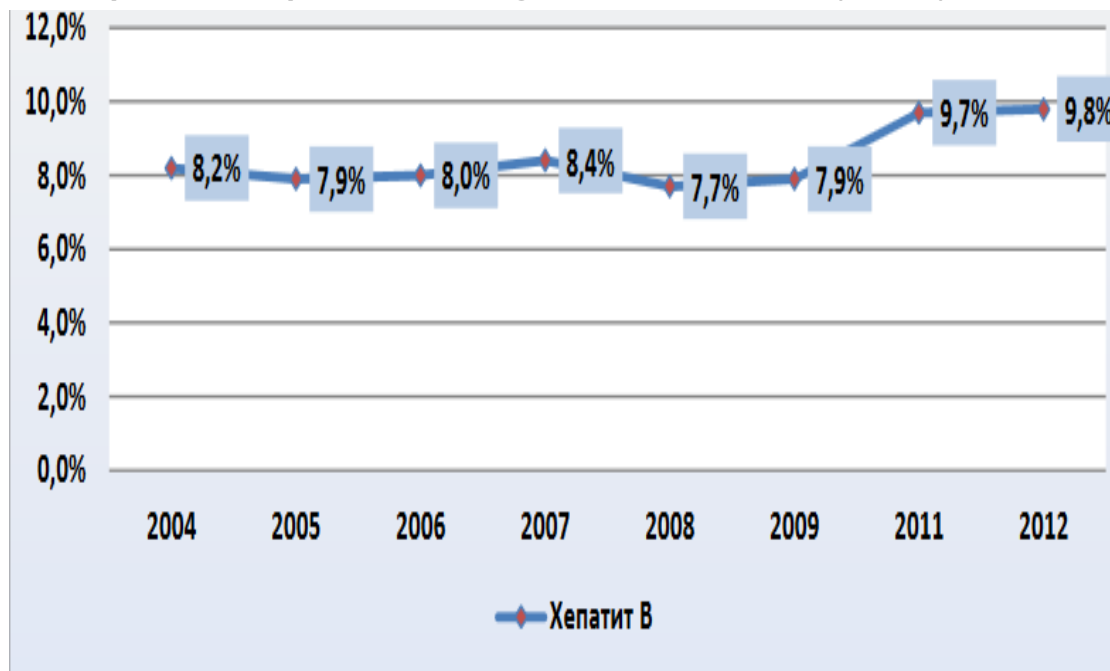
- Goal 1: Reduction of the incidence of viral hepatitis in the Republic of Bulgaria by 45% in 2025 (90% in 2030)
- Goal 2: Reduction of mortality from viral hepatitis in the Republic of Bulgaria by 30% by 2025 (60% in 2030)
- Goal 3: Achieve and maintain 95% coverage with a third dose of hepatitis B vaccine in children
- Goal 4: Eliminate the vertical transmission mechanism of the hepatitis B virus from mother to child
- Goal 5: Achieving 100% safety of used blood and blood components by testing donated blood with a quality-assured method
- Goal 6: Achieve hepatitis B and C diagnosis and treatment rates above 50% diagnosed and above 40% treated (above 90% diagnosed and above 80% treated by 2030)
- Goal 7: Reduction of the spread of viral hepatitis A, D, E

PRIORITY AREAS OF THE NATIONAL PROGRAM

- **Priority Area I. Prevention of viral hepatitis among the target groups:**
- People who inject drugs (IDUs)
- Men who have sex with men (MSM)
- Segregated ethnic communities
- Persons deprived of their freedom
- Persons offering sexual services and their clients
- Persons seeking and granted international protection and migrants
- Children and young people at risk
- Pregnant women
- Medical specialists in outpatient and inpatient care
- Patients on dialysis
- General population aged 40 - 65 years.

PEOPLE WHO INJECT DRUGS (IDUS)

- According to the National Program for Prevention and Control of HIV and Sexually Transmitted Infections:
 - Hepatitis B positive among IDU ranged from 8.2% (2008) to 9.8% (2012)
 - Hepatitis C positive ranged from 65.1% (2008) to 78.6% (2012)



MEN WHO HAVE SEX WITH MEN (MSM)

- The group size is approximately 3% of the male population aged 16-64 (about 55-60,000 people);
- Heterogeneous (persons from different social strata of society) and difficult to cover group;
- Some of the strategic interventions:
 - **provision of anonymous and free consultation and examination** through mobile medical offices and the offices for an anonymous and free consultation and examination (OAFCE) at RHI.
 - **directing/accompanying persons to a medical office/treatment facility**
 - **increasing the reach of the group with a full package of preventive interventions:**
 - ✓ counseling on safe sex practices;
 - ✓ distribution of health information materials (HIM);
 - ✓ motivation and referral/accompanying for research (including with a mobile medical office); motivation for early initiation of treatment and active referral/accompanying to specialized treatment centers.

SEGREGATED ETHNIC COMMUNITIES

- The Roma community is the most vulnerable in terms of health and social problems in Bulgaria.
- It is vulnerable to several health problems.
- Some of the strategic interventions:
 - Behavior Change Communication - Community Outreach (**Field work**);
 - Motivation for hepatitis B and C testing in **pregnant women**
 - Training for 12-15- and 16–18-year-old Roma girls and boys** and training of trainers from the Roma community;
 - Continuation of the successfully applied **method of “peers educate peers”** in a **Roma community**;
 - Prevention of the spread of hepatitis A in the Roma community**

Cases of viral hepatitis among the Roma community

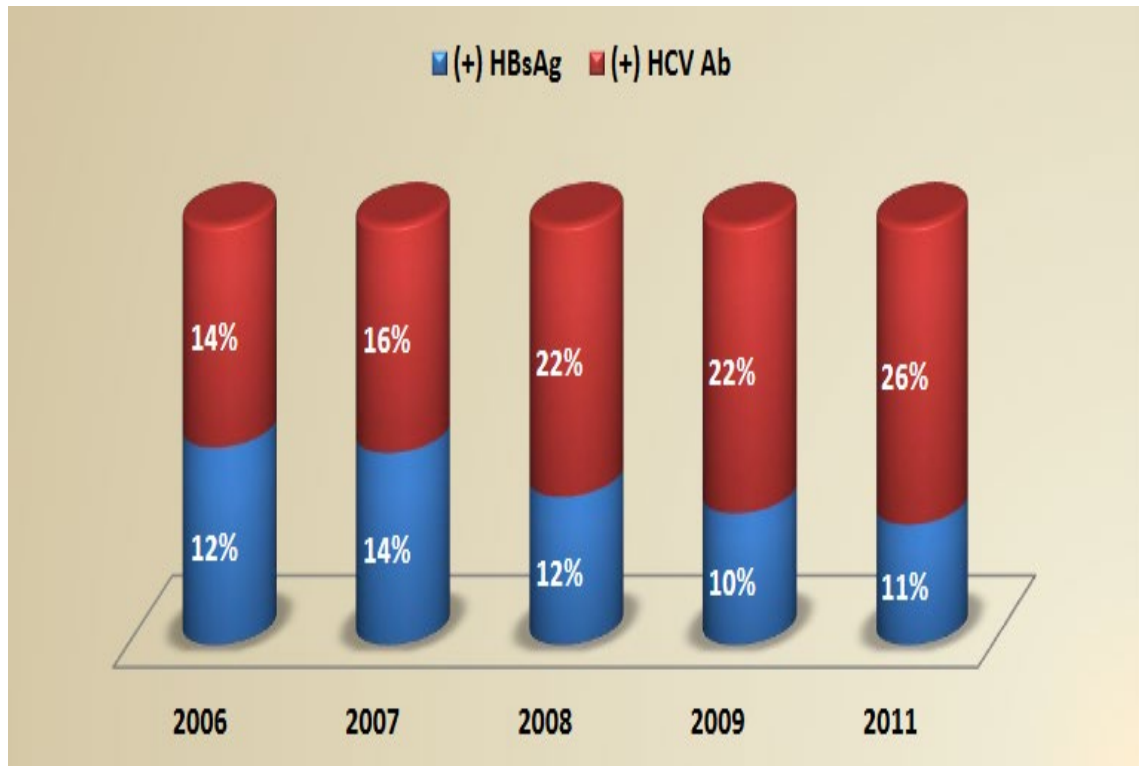


Source: National Program for Prevention and Control of HIV and Sexually Transmitted Infections

PERSONS DEPRIVED OF THEIR FREEDOM

- Prisoners are mostly young people between the ages of 18-39. The majority are low-educated, unemployed young people from marginalized groups, often without health insurance prior to entering penal institutions.
- In Bulgaria, the number of prisons is 13, of which 12 are male prisons and 1 female prison (in the period 2015-2018, their number is between 9,000 and 7,500 per year);
- Some behavioral characteristics of persons in places of imprisonment (PI):
 - On average, about 1/3 of them use drugs illegally in PI
 - at least 50% of inmates are tattooed in prison
 - on average 15% of participants' last sexual contact was with a man ("situational homosexuality")
 - Between 19-25% of them used a condom during the last sexual intercourse

PERSONS DEPRIVED OF THEIR FREEDOM



- Part of the strategic interventions:
 - Provision of health information, incl. among the staff working in the places of imprisonment
 - Counseling, voluntary testing, and referral for treatment for viral hepatitis B and C
 - Conduct additional diagnostics and treatment referral for chronic hepatitis B and C

PERSONS OFFERING SEXUAL SERVICES AND THEIR CLIENTS

- According to expert assessment, the size of the group of persons offering paid sexual services is between 12,000 - 15,000: mainly women, mainly over 25 years old, mainly from the Bulgarian ethnic community, followed by those from the Roma community.
- the group is characterized by great mobility (they live for different periods of time in Western and Central European countries)
- Some strategic interventions:
 - *Providing a package of services for the effective prevention of hepatitis B and C through field work*
 - *Increasing knowledge about viral hepatitis prevention*
 - *Implementation of information campaigns*
 - *Research and consulting*
 - *Providing treatment services*

THE GENERAL POPULATION AT THE AGE OF 40-60.

- According to data from the National Statistical Institute, they number 2.5 million people, 90% of whom have health insurance.
- When prophylactic testing for hepatitis B and hepatitis C is conducted once every 5 years, about 360,000 people are annually subject to testing.
- About 45% of health-insured citizens over the age of 18 undergo prophylactic examinations at a general practitioner, which means that annually about 220,000 people would be subject to hepatitis C testing.
- Some strategic interventions are:
 - *Providing broad access to hepatitis B and hepatitis C testing and counselling for health-insured and non-health-insured individuals in the 40, 45, 50, 55 and 60 years*
 - *A change in the regulatory framework that has already been made in 2022.*

PRIORITY AREAS OF THE NATIONAL PROGRAM

- **Priority Area 2. Hepatitis B and C Testing Policy**
- **The research policy is based on the following principles: Voluntariness, Confidentiality, Providing the opportunity for anonymous research, Providing pre-test information about testing**
- Main policies, strategic interventions and activities:
 - *Prevention of mother-to-child transmission of viral hepatitis*
 - *Inclusion of mandatory testing for hepatitis C in pregnant women*
 - *Ensuring access to HBIG for the prevention of mother-to-newborn transmission of hepatitis B virus and for hospital-acquired injuries*
 - *Blood Product Safety Policy*
 - *Improving surveillance of viral hepatitis cases among blood donors*

PRIORITY AREAS OF THE NATIONAL PROGRAM

- **Priority area 3. Hepatitis B and A immunoprophylaxis policy**
- Main strategic interventions and activities:
 - *Maintaining high immunization coverage against hepatitis B virus*
 - *Monitoring the period of placement of the 1st dose by introducing a timeliness indicator;*
 - *Preparation of a pharmaco-economic evaluation of the introduction of mandatory immunization against hepatitis A after a study of the situation in individuals, according to Ordinance No. 15 of 2005 on immunizations in the Republic of Bulgaria (medical personnel; workers in the cleaning services that directly process waste, schoolchildren and students in the food industry, etc.).*
 - *Expanding public awareness of the benefits of immunization against hepatitis A and B viruses*
 - *A survey of parents' attitudes towards the introduction of mandatory immunization against hepatitis A in children from 1 year of age.*

PRIORITY AREAS OF THE NATIONAL PROGRAM

- **Priority area 4. Providing quality follow-up, treatment, care and support for people living with hepatitis B and C**
- Main strategic interventions and activities:
 - *Change in the regulatory framework for providing access to research, counselling and treatment of hepatitis B and C for persons without health insurance*
 - *Strengthening the system of structures / departments and clinics for the treatment of chronic hepatitis*
 - *Increasing coordination between medical facilities, Regional Health Inspectorate, NGOs, methadone programs*
 - *Organization of trainings for medical specialists from specialized gastroenterology centres, methadone programs, RHI, NGO associates*
 - *Carrying out regional campaigns to explain the need for research and elimination of stigma and discrimination*

PRIORITY AREAS OF THE NATIONAL PROGRAM

- **Priority Area 5. Epidemiological surveillance and registration of viral hepatitis cases**
- Some of the main strategic interventions and activities:
 - *Strengthening the epidemiological surveillance system*
 - *Strengthening the personnel potential and increasing the qualification of the RHI personnel*
 - *Conducting seroepidemiological studies on hepatitis B and C carriers in order to assess the risk of infection and transmission of the infection.*
 - *Development, construction and maintenance of a national information system for surveillance of viral hepatitis B and C cases*
 - *Improving surveillance of hepatitis E virus*
 - *Strengthening of the capacity of the National Reference Laboratory (NRL) for diagnosis and monitoring of viral hepatitis*
 - *Creation of a National Bank of Hepatitis Virus Strains*
 - *A study of post-vaccination immunity against hepatitis B among risk groups*

PRIORITY AREAS OF THE NATIONAL PROGRAM

- **Priority area 6.** A supportive environment for a sustainable national response to viral hepatitis in Bulgaria and increasing the level of awareness of the population about the etiology, prevention, diagnosis, treatment and behaviour of individual types of viral hepatitis
- Strategic interventions:
 - The development and formal adoption of a comprehensive institutional framework with clearly defined roles and responsibilities of key ministries, municipalities and civil society organizations at national and local levels
 - Preparation of a communication strategy to increase the awareness of the population

CHALLENGES TO THE NATIONAL PROGRAM

- political commitment of the Government regarding the activities for funding in the field of viral hepatitis prevention and control;
- ensuring access to prevention, care and support services;
- change in public attitudes and awareness regarding viral prevention hepatitis at the individual and community level;
- reducing stigma and discrimination;
- functioning of the national monitoring and evaluation system;
- coordination of activities for prevention and control of viral hepatitis at national and local level