

MONTENEGRO

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



MONTENEGRO NATIONAL PLAN

- Montenegro does not have a National plan/strategy
- Only documents which is published on the site of MoH is
National Guidelines of good clinical practice for treatment Chronic Hepatitis C from 2019.

[av.https://wapi.gov.me/download-preview/ae81fc33-152e-4c3e-9b0e-b6d3597703cd?version=1.0](https://wapi.gov.me/download-preview/ae81fc33-152e-4c3e-9b0e-b6d3597703cd?version=1.0)

COUNTRY IMPACT

- Vaccination against HBV for children was introduced in Montenegro in 2002, but it started with the cohort of children born in 2003. Coverage for those born from 2003-2020. year is: with one dose 91.66%, with two doses 89.97% and with three doses 85.34%.
- Mandatory immunization against viral hepatitis "B" is subject to (among others):
 - a) persons in healthcare and other organizations who, in the performance of their duties, come into direct contact with infected persons and infectious material (blood, excreta, secretions). Unfortunately, we do not have coverage, because very few health workers have been vaccinated
- Unfortunately, the data we currently have are not sufficient to create care and impact on hepatitis C incidence

COUNTRY

SPECIFIC VIRAL HEPATITIS ISSUES AND FUTURE CHALLENGES

Country specific issues

- Blood safety Donations screened with high quality assurance
- Hepatitis B vaccination HEPB3 coverage is 85.34%.
- Harm reduction (Syringes & needles distributed/PWID/2020-40873 * / Programm covered by NGOs sector and sustainability is unclear define

*Data from Harm reduction NGOs services



CHALLENGES AND NEEDS TO REACH THE 2030 ELIMINATION TARGETS MONTENEGRO

- No National plan/or strategy for viral hepatitis
- There is no continuum of conducting biobehavioral research among the key population, so the assessment of viral hepatitis in these populations is insufficiently clear
- There is insufficient coverage of early testing,
- There is low level of education of health workers and citizens about the importance of early testing and treatment,
- There is an insufficient case reporting system,
- Under report of data from private laboratories,
- The loss of a certain number of patients for follow-up,
- A small number of registered drugs that can be used for the treatment of HBV,
- Administrative difficulties with procurement of HBV vaccines (for recommended doses)

MONTENEGRO

- 2019, the major hepatology societies agreed that there is an urgent need to simplify viral hepatitis testing and linkage to care and today this remains a priority.
- Only by decentralizing viral hepatitis services to local level care and task-sharing care, **with primary care clinicians and other health care practitioners from the preventive area we can achieve our goal**