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What still needs to be done in the prevention and control of viral hepatitis

1) HBV
• Better surveillance of chronic hepatitis and HCC.
• Good vaccination coverage. More efforts to guarantee the sustainability.
  – Improve coverage of birth dose,
  – Better screening of pregnant women,
  – Respond to increased activity of anti vaccination groups
  – Increase awareness and implementation of the guidelines
  – Communicate success stories
What still needs to be done in the prevention and control of viral hepatitis

HCV

• Better understanding of national history of HCV
• Introduction of a notification system, national registries and surveillance of chronic hepatitis and HCC.
• Pilot studies to know the prevalence of anti-HCV in the population and the cost of universal screening.
• Screening is recommended provided there are resources to treat the identified individuals.
• Promote harm reduction actions eg disposable needles, etc..
• To promote education international precaution measures for HCW
• Sustain the safety measures (NAT) of blood supply.
What still needs to be done in the prevention and control of viral hepatitis HAV

• Recommend HAV vaccination of persons traveling to relatives.

• Implementation of MSM vaccination and other risk groups.
What do you expect from the international organisation

• Verification of official reported coverage data.
• Communicate success stories
• Encourage member states to improve screening surveillance of HCV and HBV provided that these countries are able to cover the costs of treatment in those individuals identified.
• Preparation of toolkits and factsheets in the individual languages of the member states.
• Promotion of a pan-European consortium involving patient organisations to negotiate affordable prices for drugs and vaccines.
• Introduce the idea of possible eradication of HBV and HAV by vaccination.
• Increase awareness of “emerging” HEV infections
• Need for validated tests for HEV sero-prevalence studies.