



Hepatitis

Draft resolution proposed by Brazil,
Colombia, Costa Rica,
Egypt, Republic of Moldova and South
Africa

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Resolutions

- ✓ WHA 63.18:
 - Recognized viral hepatitis as a global public health problem;
 - The need for governments and populations to take action to prevent, diagnose and treat viral hepatitis and that called upon WHO to develop and implement a comprehensive global strategy to support these efforts, and expressing concern at the slow pace of implementation.
- ✓ WHA 45.17 Resolution WHA45.17 on Hep B immunization;
- ✓ Global Strategy and Plan of Action on Public Health Innovation and Intellectual Property;



Resolutions

- ✓ Deep Concern on Hepatitis with 1,4 million deaths every year besides morbidity and burden for health systems;
- ✓ Acute Infections of A and E
- ✓ Hep C not preventable but with great potential of cure and elimination;
- ✓ Diagnosis and treatment for Hep B and C are possible and good quality;
- ✓ Health Promotion and Prevention are well known;
- ✓ The birth doses of Hep continuously very low;
- ✓ Asia and Africa as examples where we still have outbreaks however access to vaccine A is low and vaccine E was not yet pre qualified by WHO;
- ✓ Unsafe practices of injection still persist in high proportion;



Resolutions

- ✓ Blood Safety is still a matter in many countries;
- ✓ Insertion of Hepatitis Response in Health Sector should be evaluated;
- ✓ UNGASS 65/2007 recognizes Targets for people who inject drugs;
- ✓ The high rates of co-infection with HIV for B and C;
- ✓ Lack of adequate surveillance systems;
- ✓ Major problem with Indigenous Populations on some countries;
- ✓ Etc.



Member States

- ✓ Strategies for preventing, diagnosing, and treating viral hepatitis based on local epidemiological context;
- ✓ Actions related to health promotion and prevention of viral hepatitis;
- ✓ To promote the involvement of civil society in all aspects of preventing, diagnosing and treating viral hepatitis;
- ✓ To put in place an adequate surveillance system for viral hepatitis to support decision-making on evidence-based policy;



Member States

- ✓ To strengthen the system for collection of blood from low-risk, voluntary, non-remunerated donors;
- ✓ To strengthen the system for quality-assured screening for HIV, hepatitis B, hepatitis C and syphilis of all donors of tissues and organs;
- ✓ To reduce the prevalence of chronic hepatitis B infection as proposed by WHO Regional Committees;
- ✓ Measures for the prevention of hepatitis A and E, in particular food and drinking water safety and hygiene promotion;



Member States

- ✓ Infection control in healthcare settings through all necessary measures to prevent the re-use of equipment designed only for single use;
- ✓ To include, where appropriate, in national immunization programmes hepatitis B vaccine for infants, working towards full coverage;
- ✓ To make special provision in policies for the equitable access to prevention, diagnosis and treatment for populations affected by viral hepatitis particularly indigenous people, migrants and vulnerable groups, where applicable.



Member States

- ✓ To consider, as necessary, national legislative mechanisms for the use of the flexibilities contained in the Agreement on Trade-Related Aspects of Intellectual Property Rights (IPR) in order to promote access to specific pharmaceutical products;
- ✓ Whenever necessary, the use of administrative and legal means in order to promote access to preventive, diagnostic and treatment technologies against viral hepatitis;
- ✓ To establish as appropriate, national harm reduction policies based on national legislation, policies and procedures, while using WHO standards;



Member States

- ✓ to implement, in line with the UNGA resolution 65/277 (paragraph 59(h)), [harm reduction programmes] taking into account the nine core interventions” included in the “WHO /UNODC/UNAIDS Technical Guide;
- ✓ to aim to transition by 2017 to the exclusive use, where appropriate, of WHO prequalified or equivalent safety engineered injection devices including Reuse Prevention (RUP) syringes and Sharp Injury Prevention (SIP) devices for therapeutic injections and develop related national policies;
- ✓ to review, as appropriate, policies, procedures and practices associated with stigma and discrimination.

REQUESTS THE WHO'S DIRECTOR-GENERAL



- ✓ to provide the necessary technical support to enable countries to develop robust national viral hepatitis prevention, diagnosis and treatment strategies with time-bound goals;
- ✓ to develop specific guidelines on adequate, effective, affordable algorithms for diagnosis in developing countries;
- ✓ In consultation with Member States, to develop a system for regular monitoring and reporting on the progress in viral hepatitis prevention, diagnosis and treatment;
- ✓ to provide technical guidance on cost-effective ways to integrate the prevention, testing, care and treatment of viral hepatitis into existing health care systems and make best use of existing infrastructure and strategies;

REQUESTS THE WHO'S DIRECTOR-GENERAL



- ✓ To work with national authorities upon their request, to promote comprehensive, equitable access to prevention, diagnosis and treatment for viral hepatitis;
- ✓ To provide technical guidance on prevention of transfusion-transmitted hepatitis B and C;
- ✓ To examine the feasibility of and strategies needed for the elimination of hepatitis B and hepatitis C;
- ✓ To estimate global, regional and domestic economic impact and burden of viral hepatitis in collaboration with Member States and relevant organizations ;
- ✓ to support Member States with technical assistance in the use of TRIPS flexibilities in accordance with the Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property;

REQUESTS THE WHO'S DIRECTOR-GENERAL



- ✓ to lead a discussion and work with key stakeholders to facilitate equitable access to quality, effective, affordable and safe hepatitis B and C treatments and diagnostics;
- ✓ to assist Member States to ensure equitable access to quality, effective, affordable and safe hepatitis B and C treatments and diagnostics, in particular in developing countries;
- ✓ to maximize synergies between viral hepatitis prevention, diagnosis and treatment programmes and ongoing work to implement the WHO Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020;

CALL TO ALL INTERNATIONAL ORGANIZATIONS



- ✓ to include prevention, diagnosis and treatment of viral hepatitis in their respective work programmes and work in close collaboration;
- ✓ to identify and disseminate mechanisms to assist countries in the provision of sustainable funding for prevention, diagnosis and treatment of viral hepatitis.



Thank you!

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