



# Hepatitis C elimination in Georgia

*Presented by*

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**A viral hepatitis free future : how to make it feasible and affordable**

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# Georgia: Hepatitis C burden of disease

Prevalence among general population – **6.7%** (*Tbilisi population-based survey, 2000-2002*)

## Prevalence among different population groups:

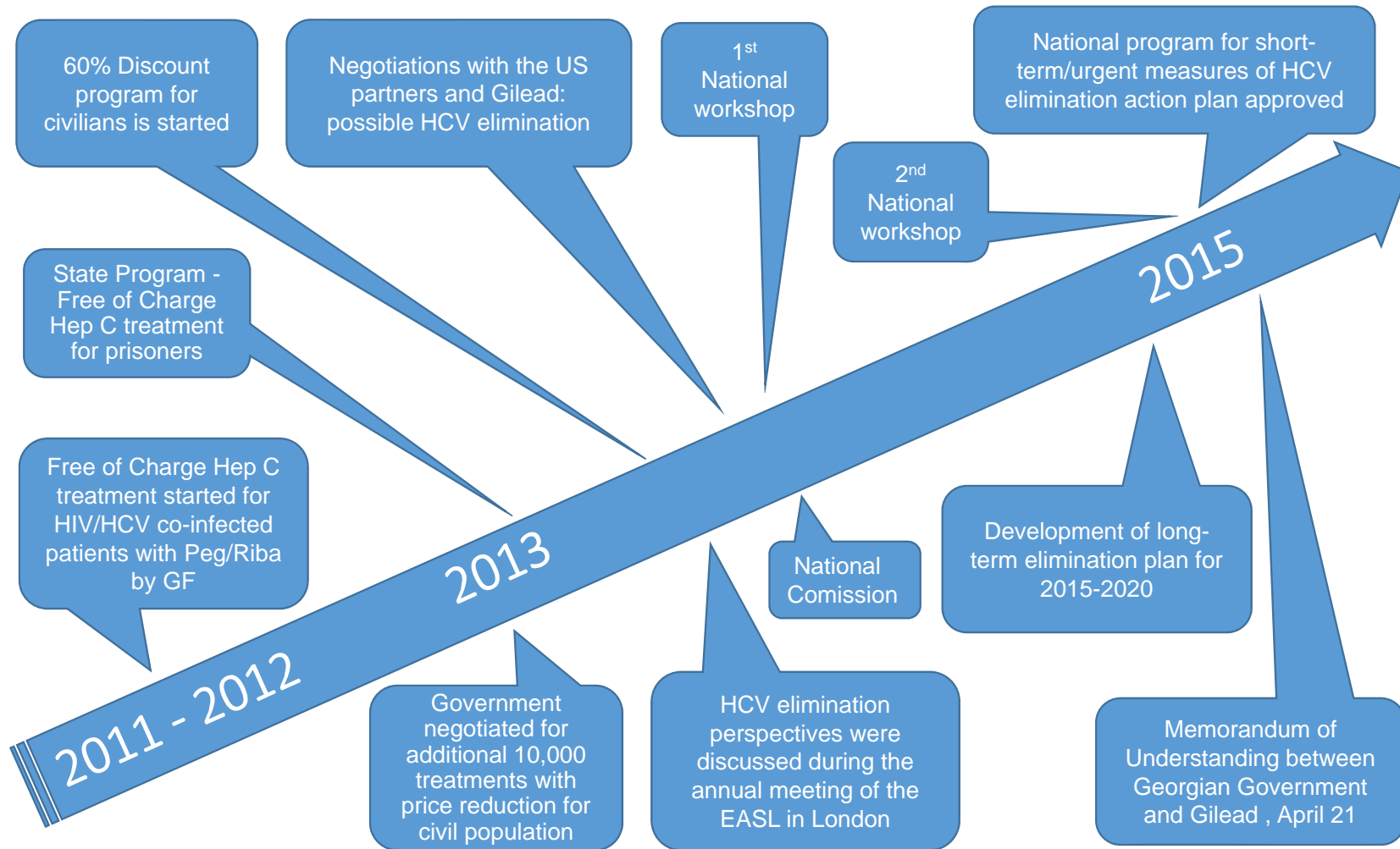
- ✓ IDUs: **50-92%** (various studies 1999-2012)
- ✓ TB Patients: **21%** (Lomtadze et al, 2013)
- ✓ MSM: **17.3%** (BSS in Tbilisi, 2010)

## HCV Genotypes in Georgia

Genotype	General pop*	IDU (2012)**	HIV Co-infected***
HCV 1	43%	22%	42%
HCV 3	37%	66%	35%
HCV 2	20%	20%	18%



# Recent progress against HCV in Georgia



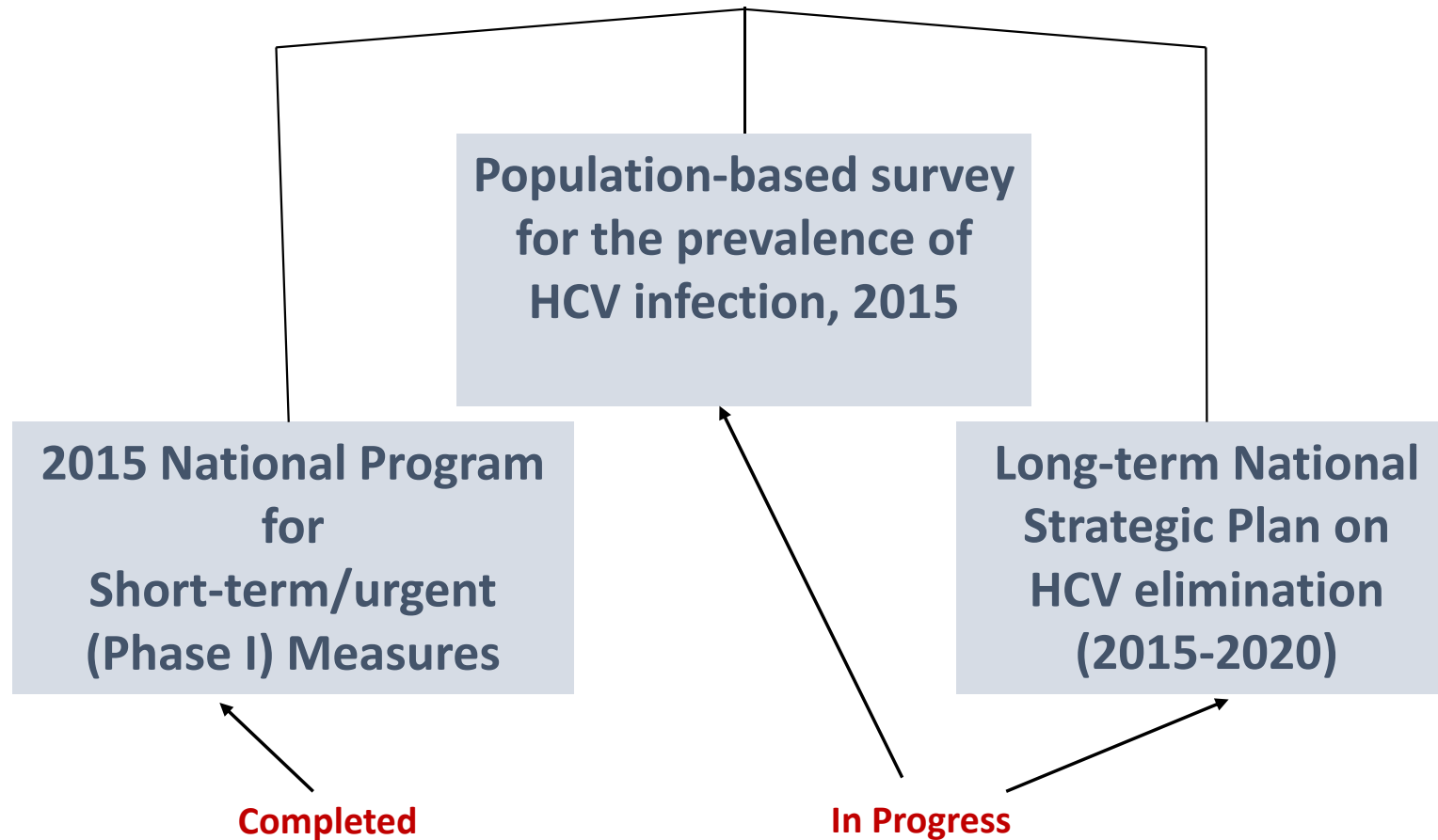


# Treatment of Hepatitis C

- The number of patients who need treatment will be identified based on results of population-based seroprevalence survey – end of August, 2015
- Since 2011 Patients with co-infection HIV/HCV have been treated for hepatitis C under the Global Fund project. 422 patient are included in this program.
- Since 2013 In the Penitential system annually 1000 prisoners with HCV are ensured by free Diagnostics and treatment (Interferon+Ribavirin) free of charge.
- Since May 15, 2015 - 60 patients are involved in the treatment with Sofosbuvir
- Medications available:
  - Sofosbuvir, Interferon, Ribavirin



# Current Major Activities



# 2015 National Program for Short-term/urgent Measures (Phase I) of Hepatitis C Elimination Action Plan



## Goal

*Reduce HCV-related morbidity, mortality and prevalence  
by gradually providing accessibility to prevention,  
diagnostics and introduction of new antiviral drug  
(**Sofosbuvir/Harvoni**)  
for treatment of the disease*





# Main activities

- Selection of service providers to provide diagnostic procedures for patients
- Arrangement of treatment sites
- Selection of HCV infected persons for enrollment in the 1<sup>st</sup> Phase of treatment (appx. 5 000 patients with F4 and F3)
- Strengthening regulation of infection control in medical facilities, beauty salons, dentist clinics





# Hepatitis C Elimination Strategy and Action Plan, 2015-2020

## Goal

*Elimination of HCV by ensuring prevention, diagnostics and treatment of the disease*

## Objectives

- Universal access to diagnostics and treatment
- Provision of clinical and laboratory investigations
- Reduction of disease transmission through preventive measures





# Georgia: Health care system in view of the hepatitis prevention and control



- Ministry of Labour, Health and Social Affairs of Georgia
  - Policy/Strategy Development
- National Center for Disease Control and Public Health
  - Surveillance
  - Control measures
  - Prevention
- Municipal Public Health Centers (countrywide)
- Infectious Diseases Hospitals
  - Diagnostics and treatment of patients enrolled in the program





# Georgia: Hurdles

- Accurate data on prevalence among general population is needed (ongoing population-based survey)
- Infection control should be enhanced (medical facilities, dentistry clinics)
- Licensing and monitoring of non-medical facilities (e.g. tattoo and beauty salons)
- Screening programs should be enhanced for some population groups (Pregnant women, military servants, PWID, etc.)



# Feasibility of HCV elimination in Georgia (1)



- Small size and population of the country
- High prevalence of HCV infection in general population
- Strong Governmental commitment towards elimination of HCV
- Close partnership with US CDC and other organizations
- Strong human and technical resource capacity providing high quality diagnostics, treatment and care for hepatitis C patients.
- Effective systems for large-scale national and international health programs
- Updated national hepatitis C treatment guidelines and protocols



# Feasibility of HCV elimination in Georgia (2)



- Availability of logistic and control mechanisms within existing national HIV/AIDS, Tuberculosis and hepatitis C treatment programs that effectively prevent leakage of medicines to local and/or neighboring markets
- Best practice experience in the field of HIV/AIDS that can be replicated for hepatitis C programs. Namely achievement of universal access to antiretroviral therapy (ART) that remains unique for the Eastern European region for more than a decade
- Active participation of NGOs in response to HIV/AIDS, hepatitis C and other public health problems
- Civil society as key player in harm reduction, needle exchange, peer education, advocacy programs etc.



# International support of control and treatment of viral hepatitis



- US CDC
- CDC South Caucasus Office
- Gilead
- WHO HQ & WHO Euro
- Emory University
- Bristol University
- Global Fund



# Thank you



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