

## Position Statement

### CANADIAN HEPATITIS C STRATEGY

Action Hepatitis Canada (AHC) calls on the government of Canada to develop a national strategy towards the elimination of Hepatitis C from Canada.

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#### **Background**

Hepatitis C (HCV) is a life-threatening virus that attacks the liver and can cause liver fibrosis or scarring, which may lead to cirrhosis and ultimately liver cancer or death from liver failure. As of 2011, at least 250,000 Canadians were living with HCV, with thousands of new infections occurring every year.<sup>i</sup>

Identified in 1989, HCV is a leading cause of cirrhosis, liver cancer and liver transplantation in Canada.<sup>ii</sup> There is now a cure for HCV. Despite there being a cure, the prevalence of advanced liver disease as a result of HCV continues to rise.<sup>iii</sup> To date, this rising burden of HCV in Canada has not been met with a paralleled response from Canadian governments.

#### Opportunity and Challenge

Hepatitis C is a well-understood virus. It is preventable and it is curable. Recent advances in medicine mean that hepatitis C can now be cured in almost all cases in as little as 8 to 12 weeks.<sup>iv</sup> These new treatments - along with our knowledge about successful prevention practices - make the prospect of eliminating HCV in Canada a real possibility.

Even with this progress, nearly half of the Canadians who are living with HCV are unaware of their infection.<sup>v</sup> Of those who are aware of their infection, too few are being treated to cure the disease. ([See AHC's position paper on Access to Treatment.](#)) At these low rates of diagnosis and treatment, HCV rates will continue to rise as will healthcare costs due to expensive treatment for liver failure and liver cancer such as liver transplantation.<sup>vi</sup>

The elimination of HCV across Canada will require federal leadership. An effective national strategy would align and coordinate all of those involved in the prevention and management of HCV towards the common, achievable goal of the elimination of this virus in Canada. We are calling on our federal government to recognize HCV as an important public health threat that can be eliminated, and to establish a plan of action towards that end.

#### International Progress

In recent years, the World Health Organization (WHO) has responded to the health burden of viral Hepatitis by passing several resolutions calling on its member states to develop and implement viral

## Hepatitis strategies.

Despite endorsing the WHO's 2014 resolution urging member groups to '*develop and implement coordinated multisectoral national strategies for preventing, diagnosing and treatment viral hepatitis*,'<sup>vii</sup> Canada has yet to follow-up with meaningful action.

While Canada has been conservative in its response to progress in the field of HCV, other countries including [Australia](#), [Egypt](#), [France](#), [Ireland](#), [Mongolia](#), the United Kingdom ([England](#), [Northern Ireland](#), [Scotland](#) and [Wales](#)) and the [United States of America](#) have answered the challenge. These countries have developed national strategies, facilitating progress by ensuring the implementation of evidence-based prevention and screening practices, and negotiating lower prices for HCV medicines.

Canada has the opportunity to take action on HCV. The development of a well-resourced, multi-sectorial strategy would allow us to take appropriate action to prevent, diagnose and treat HCV, positioning ourselves to eliminate this virus from Canada in the coming years.

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<sup>i</sup> Trubnikov M, Yan P, Archibald C. *Estimated Prevalence of Hepatitis C Virus infection in Canada, 2011*.

<sup>ii</sup> RP Myers, MD MSc; Mel Krajden, MD; Marc Bilodeau, MD; et al. Burden of disease and cost of chronic hepatitis C virus infection in Canada. *Canadian Journal Gastroenterol Hepatol*. 2014 May; 28(5): 243-250.

<sup>iii</sup> RP Myers, MD MSc; Mel Krajden, MD; Marc Bilodeau, MD; et al. Burden of disease and cost of chronic hepatitis C virus infection in Canada. *Canadian Journal Gastroenterol Hepatol*. 2014 May; 28(5): 243-250.

<sup>iv</sup> RP Myers, H Shah, KW Burak, C Cooper, JJ Feld. *An update on the management of chronic hepatitis C: 2015 consensus guidelines from the Canadian Association for the Study of the Liver*. *Can J Gastroenterol Hepatol* 2015 In Press

<sup>v</sup> Trubnikov M, Yan P, Archibald C. Estimated Prevalence of Hepatitis C Virus infection in Canada, 2011. *Canada Communicable Disease Report: Volume 40-19*, December 18, 2014. Available at: <http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/14vol40/dr-rm40-19/surveillance-b-eng.php>

<sup>vi</sup> Max Trubnikov, Ping Yan, Jane Njihia, Chris Archibald. *Identifying and describing a cohort effect in the national database of reported cases of hepatitis C virus infection in Canada (1991-2010): an age-period-cohort analysis*. *CMAJ OPEN*, 2(4).

<sup>vii</sup> Hepatitis. World Health Assembly Resolution 67.6. 24 May, 2014.