

January 28, 2016

Canadian Agency for Drugs and Technologies in Health  
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To whom it may concern,

We are appreciative of the opportunity to provide feedback on CADTH's *Systematic Review and Meta-Analysis on Screening for Hepatitis C Virus*.

We would like to begin our feedback by expressing our concern that the treatment-related information presented in the Rationale and Policy Issues section of CADTH's *Screening for Hepatitis C Virus: A Systematic Review and Meta Analysis – Project Protocol* is incomplete. Specifically, this section does not make reference to the extensive progress that has occurred in the treatment (and cure) of Hepatitis C since 2011. New HCV treatments boast Sustained Virologic Response rates (SVR) of approximately 95% and come with minimal side-effects.<sup>i</sup> Compared to previous treatments, this progress is monumental and changes the dynamic of discussions on all issues relating to HCV from prevention, screening and diagnosis through to discussions surrounding access to treatment and care.

New treatments have the potential to contribute to the elimination of HCV in Canada. In order to achieve this goal, people need to be made aware of their viral status. Current federal guidelines recommend screening for at-risk populations including people who use drugs, prisoners and immigrants. This risk-based approach has had limited success leaving an estimated 21% to 70% of those living with HCV unaware of their viral status. New approaches are required in order to improve rates of HCV diagnosis and treatment in our country.

In Canada, people born between the years of 1945 and 1975 represent more than half of all chronic HCV infections.<sup>ii</sup> A large proportion of these people have been living with the virus unaware for several decades and are now in need of extensive healthcare due to symptoms related to advanced liver disease including liver failure and liver cancer. Screening and diagnosis before the onset of advanced liver disease is crucial as it contributes to improved quality of life, improved likelihood of SVR and decreased health care costs overall<sup>iii,iv</sup>.

To this end, the AHC recommends that current risk-based screening recommendations be complemented with the implementation of one-time screening for people born between the years of 1945 and 1975<sup>v</sup>.

Positive people across the country have been calling for screening for this age cohort for many years. This recommendation has also been made by the Canadian Liver Foundation. One-time, voluntary age cohort testing for HCV is also recommended by the Centers for Disease Control and Prevention and Preventative Services Task Force in the United States of America.

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The following are a sample of sources that examine the effectiveness and benefits related to screening people born between 1945 and 1975 for HCV:

- Adriaan J van der Meer, MD; Bart J. Veldt, MD, PhD; Jordan J Feld, MD, PhD; et al. *Association Between Sustained Virological Response and All-Cause Mortality Among Patients with Chronic Hepatitis C and Advanced Hepatic Fibrosis*. JAMA. 2012; 308(24):2584-2593.
- American Association for the Study of Liver Disease. *Baby Boomers Should get Tested for HCV*. Accessed November 7, 2015 at [www.aasld.org](http://www.aasld.org)
- American Association for the Study of Liver Diseases. *Recommendations for Testing, Managing, and Treating Hepatitis C*. Accessed online October 1, 2015 at <http://www.hcvguidelines.org/>.
- Dena Schanzer, Dana Paquette, Lisa Lix. *Historical trends and projected admissions for chronic hepatitis C infection in Canada: a birth cohort analysis*. CMAJ 2014 Open 2(3).
- Final Recommendation Statement - *Hepatitis C: Screening, June 2013*. US Preventative Services Task Force. <http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/hepatitis-c-screening>.
- Hemant A. Shah, Jenny Heathcote, Jordan Feld. *A Canadian Screening Program for Hepatitis C: Is now the Time?* CMAJ, October 15, 2013, 185(15).
- Karen Van Nuys, Ronald Brookmeyer, Jacquelyn Chou et al. *Broad Hepatitis C Treatment Scenarios Return Substantial Health Gains, But Capacity is a Concern*. Health Affairs 34, No 10 (2015): 1666-1674.
- 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).
- Payne E, Totten S, Archibald C. *Hepatitis C Surveillance in Canada*. *Canada Communicable Disease Report*. December 18, 2014. Volume 40-19.
- Public Health Agency of Canada. *Primary Care Management of Chronic Hepatitis C. Professional Desk Reference 2009*. Accessed November 7, 2015 at [www.phac-aspc.gc.ca](http://www.phac-aspc.gc.ca).
- Remis RS. *Modelling the incidence and prevalence of hepatitis C infection and its sequelae in Canada, 2007*. Ottawa (ON): Public Health Agency of Canada; 2007
- 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.

- Testing Recommendations for Hepatitis C Virus Infection. Centers for Disease Control and Prevention. <http://www.cdc.gov/hepatitis/hcv/guidelinesc.htm>
- 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>
- William W.L. Wong PhD, Hong-Anh Tu PhD, Jordan J. Feld MD MPH, Tom Wong MD MPH, Murray Krahn MD MSc. *Cost-effectiveness of screening for hepatitis C in Canada*. Canadian Medical Association Journal. Published at [www.cmaj.ca](http://www.cmaj.ca).

Thank you again for the opportunity to offer our feedback on this important issue.

Sincerely,



Patricia Bacon  
Chair, Action Hepatitis Canada

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<sup>i</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>ii</sup> Payne E, Totten S, Archibald C. *Hepatitis C Surveillance in Canada*. *Canada Communicable Disease Report*. December 18, 2014. Volume 40-19.

<sup>iii</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>iv</sup> Younossi ZM, Stepanova M, Henry L, et al. *Effects of sofosbuvir-based treatment, with and without interferon, on outcome and productivity of patients with chronic hepatitis C*. Clin Gastroenterol Hepatol. 2013.

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<sup>v</sup> The AHC has issued a position paper on this subject entitled *Pricing of Hepatitis C Medicines in Canada* which can be found on our website at [www.actionhepatitiscanada.ca](http://www.actionhepatitiscanada.ca).