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#### **ABOUT COVER**

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#### **AIMS AND SCOPE**

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LETTER TO THE EDITOR

## Progress on global hepatitis elimination targets

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#### Abstract

In 2016, the World Health Assembly adopted a Global Health Sector Strategy on viral hepatitis, with targets set for the years 2020 and 2030 to achieve hepatitis elimination. The main target of hepatitis elimination strategy is to reduce the incidence of hepatitis B virus (HBV) and hepatitis C virus (HCV) by 90% and mortality by 65% in 2030. In last 5 years, the number of people receiving HCV treatment has increased from 1 million to 9.4 million; however, this number is far from the 2030 target of 40 million people receiving HCV treatment. HBV and HCV incidence rates are down from 1.4 million to 1.1 million annual deaths but this is far from the 2030 target of < 0.5 million deaths. The coronavirus disease 2019 pandemic has severely affected the efforts in the fight against hepatitis. No major donor has committed to investing in the fight against hepatitis. Time is running out. There is a need to speed up efforts in the fight against hepatitis to achieve hepatitis elimination by 2030.

Key Words: Hepatitis elimination; Blood donations; Safe injections; Hepatitis B vaccination; Harm reduction

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Core Tip: In 2020, progress was made in improving blood donations, hepatitis B and C treatments, and decreasing the incidence of hepatitis B and C. Some of the 2020 targets for hepatitis elimination were achieved but the 2030 targets are very ambitious and need strong political and financial support.

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#### TO THE EDITOR

I read articles from Tijera *et al*[1], and Pisano *et al*[2], on viral hepatitis update, progress, challenges, and ways to elimination. Both articles are discussing important points on viral hepatitis but both are missing the actual progress on hepatitis elimination targets set by World Health Organization (WHO).

In this article, I am presenting the latest data on targets set by the WHO to achieve hepatitis elimination by 2030. In last 5 years, the incidence of hepatitis B virus (HBV) and hepatitis C virus (HCV) has decreased from 8 million infections to 3 million infections per year and mortality has decreased from 1.4 million deaths to 1.1 million deaths per year[3]. Only 17 countries had a national hepatitis strategic plans in 2012, but this increased to 124 by 2019[3].

The WHO Global Health Sector Strategy on viral hepatitis has shown five areas in which progress is requested to achieve hepatitis elimination by 2030. These areas are: HBV vaccination, birth dose HBV vaccination, safe injection, harm reduction, and diagnosis and treatment of HBV and HCV[4].

From 2015 to 2020, the worldwide coverage of the third dose of HBV vaccine has increased from 82% to 85% and administration of birth dose of HBV vaccine has increased from 38% to 43%. The number of safe blood donations has increased from 89% to 97% and only 3.9% of injection equipment are still reused. The number of clean syringes given to each person who inject drugs per year has increased from 20 to 33. The HBV diagnosis rate has increased from < 5% to 10% and 22% of diagnosed cases received treatment. The HCV diagnosis rate has increased from < 5% to 21%, and 62% of diagnosed cases received treatment[3,4].

New data shows progress with reference to 2020 hepatitis elimination targets for blood donation screening, HBV and HCV treatments, reduction in drug pricing, and decreasing the incidence of HBV and HCV[3]. However, the 2030 targets of hepatitis elimination are very ambitious and need a strong political and financial commitment [5].

Hepatitis elimination targets needs an investment of US \$6 billion per year[3]. No major donor has committed to the fight against hepatitis[3]. Many countries with well-developed hepatitis control programs are lacking financial resources to achieve targets.

The coronavirus disease 2019 (COVID-19) pandemic has severely affected the hepatitis elimination targets. Outpatient departments/liver clinics have remained closed in many countries due to lockdown restrictions. Many countries have spent a major proportional of their health budget on COVID-19 and the nascent viral hepatitis programs are being held back due to a lack of funding[3].

This is the time to put money into the fight against hepatitis and increase HBV and HCV diagnosis and treatment rates[5]. There is a strong need to obtain a cure for HBV and further develop and simplify hepatitis screening tests and make them available in primary health care settings[3]. It is the time to set interim hepatitis elimination targets for 2026 as a milestone towards 2030 targets.

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