National Hepatitis Elimination Profiles: Progress Towards HBV and HCV Elimination in the Americas

INTRODUCTION
In 2020, the Coalition for Global Hepatitis Elimination (CGHE) developed data dashboards on the platforms by collecting additional data available locally and translating the data into advocacy tools for policy development, resource mobilisation, and greater commitment to the 2030 goals for hepatitis elimination.

AIM
In 2021, CGHE began development of NHEPs to assess the country’s hepatitis burden, plans, policies, programs, and progress toward implementation targets and health outcome goals. With the profiles, local partners can highlight achievements, call out remaining challenges, and propose feasible next steps to accelerate progress toward hepatitis elimination.

METHOD
Countries within the WHO Americas region were examined for those with the highest hepatitis B and C burden. To develop the NHEPs, local partners in the Coalition, including government officials, clinicians, and civil society stakeholders were convened. Country-level hepatitis data were collected from credible sources including academic publications, Ministry of Health reports, WHO, UNICEF, and the Institute for Health Metrics and Evaluation. Data covers key epidemiological, program monitoring, and policy indicators. NHEPs are dynamic and are revised as data becomes available.

RESULTS
Progress towards elimination goals across a set of indicators was assessed for Argentina (AG), Brazil (BR), Canada (CA), Mexico (MX), Peru (PE), and the United States (US). See Figure 1. All countries except PE have established HBV elimination goals. All countries have HBV national action plans. AG, CA, and the US have HBV elimination goals and together with PE have HBV national plans. All nations except MX have set goals for elimination of HBV mother to child transmission. All nations except CA have policies for HepB birth dose vaccination with >50% coverage, the 2020 WHO interim target. AG, BR, and US have policies for routine HBV and HCV screening of pregnant women, while CA and PE only have policies for HBV, and MX only for HCV. Regarding hepatitis testing, all countries have risk-based screening policies for HCAs, AR, BR, and US recommend general population or age- or birth-cohort HCV screening. AG, BR, CA, and US have recommendations beyond risk-based screening. Regarding HCV treatment, all countries have removed some or all restrictions for simplified care algorithms. Figure 2. MX adopted all national policies expanding access to HCV treatment. Regarding strategic information, only AG and BR have national public health systems to routinely track the number of persons tested and treated for HBV and HCV. BR is the only country on track to meet all WHO 2020 HBV and HCV interim elimination targets. All countries have achieved the WHO/RDG target of 1% HBsAg prevalence among under-5 children by 2020.

CONCLUSIONS
The NHEPs reveal the strengths and challenges of national HBV and HCV elimination programs in the Americas. Comparison of program attributes across countries promotes sharing of lessons learned. The expansion of monitoring systems of HBV and HCV diagnosis and treatment uniformly is needed. Additionally, expanded screening policies of Hep B and C can be implemented to increase the number of persons living with hepatitis diagnosed and linked to care. Importantly, local coalitions can leverage the NHEPs to spur policy change that advance progress toward elimination. The full country profiles can be found at: https://www.globalhep.org/data-dashboards/national-hepatitis-elimination-profiles.

REFERENCES

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Additional stakeholders from each country include:
Argentina: Ministry of Health, HCIV Sin Fronteras, and the Latin American Association for the Study of the Liver (ALD).
Brazil: Ministry of Health, Gopo Otimismo, and the Pan-American Health Organization (PAHO).
Canada: CAAIT, the Canadian Association for the Study of the Liver, and Action Hepatitis Canada.
Mexico: National Hepatitis C Observatory of Mexico (includes Ministry of Health) with input from the AIDS Healthcare Foundation.
United States: American Association for the Study of the Liver (AASLD), the Hepatitis B Foundation, the National Association of State and Territorial AIDS Directors (NASAD), the National Vital Hepatitis Records (NVHR), and US CDC.

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