

Current Health Event

Test. Treat. Hepatitis

The World Health Organization and partners are calling on countries to urgently increase hepatitis testing and treatment services in order to eliminate viral hepatitis as a public health threat by 2030. The calls came in the lead up to World Hepatitis Day on 28 July 2018 which focused on the theme “Test. Treat. Hepatitis.”

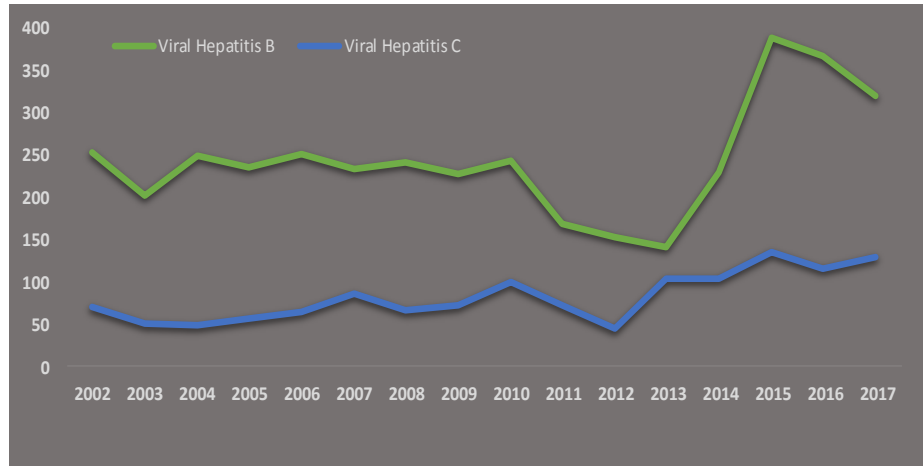
Editorial note:

Viral hepatitis B (HBV) and C (HCV) are major public health threats affecting around 325 million people worldwide and causing approximately 1.34 million deaths annually. HBV and C are chronic infections that may remain asymptomatic for as long as years or even decades. More than 60% of liver cancer cases are due to late testing and treatment of HBV and C. Low coverage of testing and treatment is the most important gap to be addressed in order to achieve the global elimination goals by 2030.

Globally, around 300 million people are unaware of their infection with viral hepatitis. Worldwide, less than 20% had access to testing and treatment services for hepatitis B and C at the end of 2016. Without finding the undiagnosed and linking them to care, millions will continue to suffer, and lives will be lost (WHO, 2018).

The WHO’s last official assessment of viral hepatitis in Lebanon conducted in 2007 estimated that the incidence rate of hepatitis B is 6 per 100,000 population with a prevalence ranging from 1.6% to 2.2%. The incidence rate of hepatitis C did not exceed 1.7 cases per 100,000 individuals and the prevalence was 0.7%. Moreover, almost 0.2% of the population was found to have a co-infection. Higher prevalence for both infections are expected in selective high-risk populations such as haemodi-

Figure 1: Frequency of MoPH reported hepatitis B and C (July 2018)



lysis patients and drug abusers.

In 2012, Abou Rached et al. conducted another national prospective cross sectional study aiming to determine the prevalence of hepatitis B and C in Lebanon. The study published in 2016 estimated that 1.74% of the Lebanese population were living with hepatitis B while 0.21% were living with hepatitis C. Results place Lebanon amongst countries with low endemicity for both viruses.

The low prevalence of hepatitis in Lebanon is believed to be attributed to the various awareness campaigns, the success of the MOPH National Hepatitis Program in vaccinating all newborns with hepatitis B since 1998, in premarital and high risk group screening, subsidizing treatment for hepatitis B and C for poor people based on nationally adapted guidelines, and ensuring vigilant blood transfusions through the various blood banks.

With the support of WHO, the MoPH will continue its efforts until transmission is halted and everyone living with viral hepatitis has access to safe, affordable, and effective care and treatment.

On World Hepatitis Day, WHO is calling on people to take action, raise awareness and join the quest to finding the “missing millions”

WHO Viral Hepatitis Strategy

Priority actions of the global health sector strategy on viral hepatitis 2016-2021 are organized under five strategic directions:

- Information for focused action
- Intervention for impact
- Delivering for equity
- Financing for sustainability
- Innovation for acceleration

Notifiable Diseases in Lebanon [cumulative n° of cases among all Residents (among Syrians)] as of 2 August 2018

Disease	2017	2018	Jun 18	Jul 18
Vaccine Preventable Diseases				
Polio	0	0(0)	0(0)	0(0)
AFP	77	55(21)	7(2)	6(3)
Measles	126	803(156)	163(19)	75(8)
Mumps	235	76(27)	5(1)	11(2)
Pertussis	92	37(15)	3(1)	5(0)
Rabies	1	2(1)	0(0)	1(1)
Rubella	10	6(1)	0(0)	0(0)
Tetanus	0	0(0)	0(0)	0(0)
Viral Hep. B	321	147(16)	21(3)	10(4)
Water/Food Borne Diseases				
Brucellosis	460	143(18)	22(6)	12(4)
Cholera	0	0(0)	0(0)	0(0)
Hydatid cyst	18	2(1)	0(0)	0(0)
Typhoid fever	656	154(3)	22(0)	11(0)
Viral Hep. A	776	446(97)	44(14)	43(4)
Other Diseases				
Leishmaniasis	140	0(0)	0(0)	0(0)
Meningitis	366	244(50)	51(7)	31(7)
Viral Hep. C	130	60(5)	9(0)	5(1)