

Malta's National Strategy for the **Elimination** of Hepatitis C Virus

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The National Strategy (2018-2025)

Malta has endorsed the **São Paulo Declaration** on Viral Hepatitis, committing to take a broad and coordinated approach to support implementation of the core interventions outlined in WHO's Global Hepatitis Strategy.



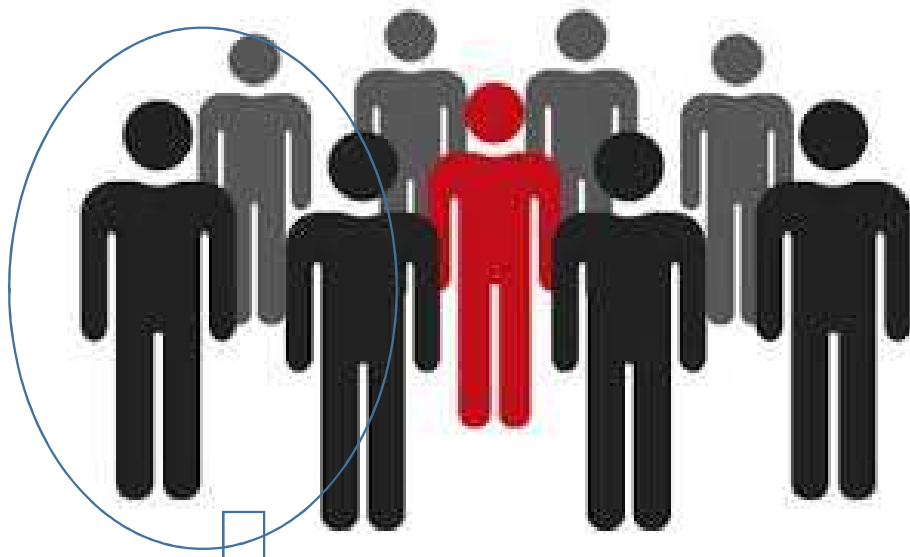
How it was developed

- The National Strategy (2018-2025) consultation document was forwarded February 2018
- Produced by the **Ministry of Health**




Local situation

Estimated **1000** patients currently infected with HCV



60%

30-60 years old



Around 10-15 new cases are notified to the Infectious Disease and Control Unit per year

Vision

*“The vision is to reach a state where transmission of HCV is **halted in Malta by 2025**, and everyone living with HCV has access to safe, affordable and effective prevention, testing, care and treatment services”.*



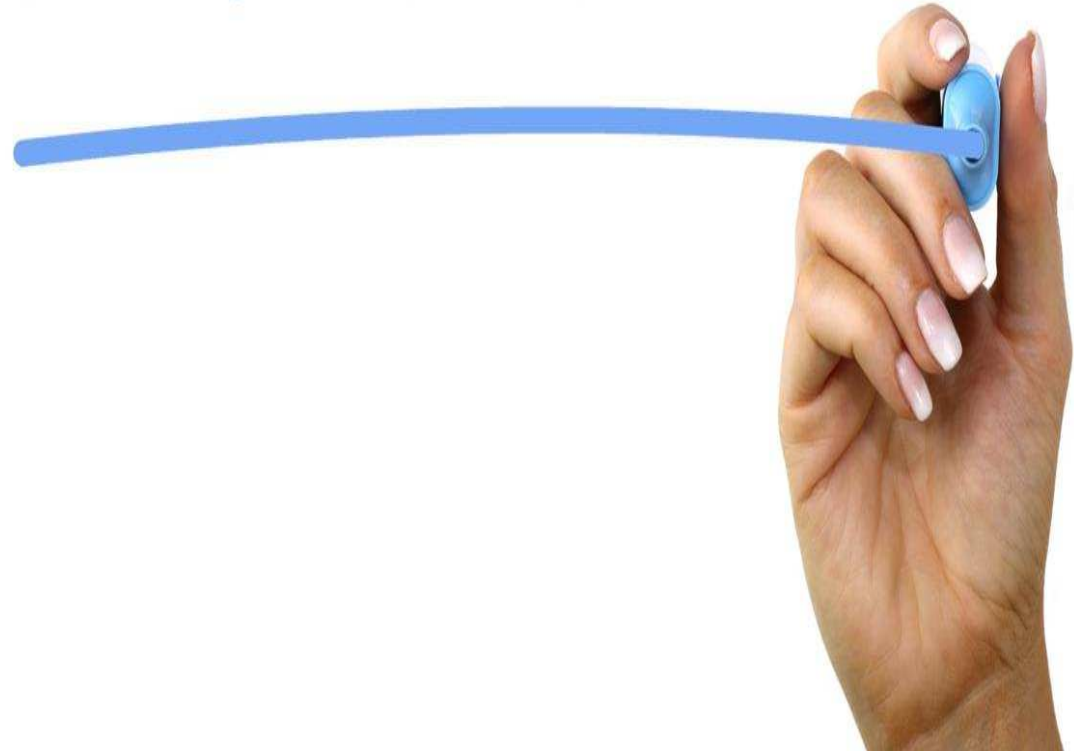


Policy Context

- based on a public health approach
- concerned with
 - preventing infection and disease,
 - early diagnosis and treatment,
 - promoting health,
 - improving the quality of life, and
 - prolonging life among the population.
- eliminating hepatitis is cheaper than not doing anything

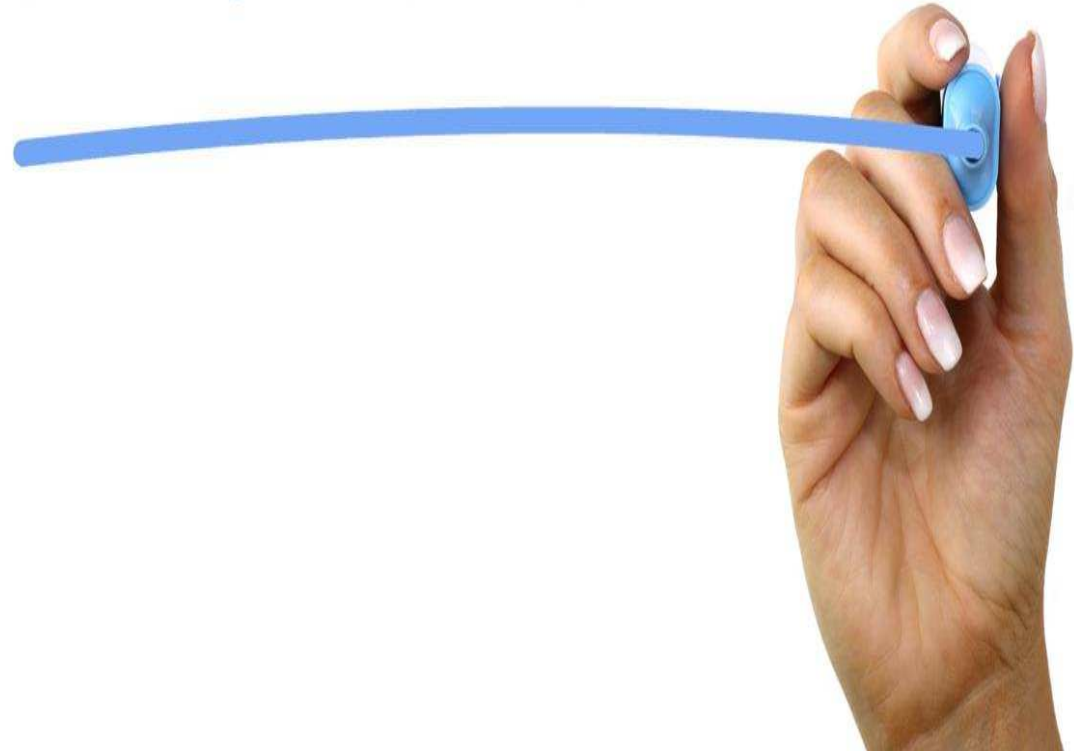
- Preventive efforts focus on **eliminating all sources of contagion**
- Includes improving the safety:
 - of drug injection practices
 - in health care settings
 - of blood and blood products

PREVENTION



- Reducing infections through sexual contacts, tattoos and piercings
- **Increasing awareness** and developing skills on prevention among key populations

PREVENTION





Screening and diagnosis

- Performing contact **tracing on all persons** with a new diagnosis of HCV
- **Targeted screening** of key populations:
 - Persons who use drugs intravenously or nasally
 - Children born to mothers infected with HCV
 - Persons with HIV
 - Corradino Correction Facility inmates



Treatment

- The overall aim of the strategy is to treat **200 patients** a year, the goal being to treat the estimated **1000 to 1500 patients in the next 5 years.**
- At the moment treatment is offered to patients in contact with the hospital and with a **METAVIR score of 4** (more serious fibrosis).
- The plan is to then offer treatment to the rest, those having less advanced fibrosis.



PWID Treatment

- Currently the only restriction is actually the **willingness of patients** to establish contact and attend for their appointments with the hospital specialist.
- Being an active PWID is not a restriction as such but treatment has been withheld for some **considered to be chaotic and unlikely to commit** to take the medication as prescribed.



PWID Treatment

- We at FSWS Detox are contributing to the elimination effort by **facilitating referral** of patients who are known to us to be HCV positive.
- We have come across **patients who refuse referral** and currently we are letting them be, hoping they will change their mind or maybe we will find some way to entice them later on.

Treatment

- **New drugs are available** that can cure HCV within 8 weeks with minimal side effects and toxicity.
- effective if **all persons with HCV will have access to these medications**, and not only those with complications of HCV.



Treatment

- Ensuring **laboratory and clinic capacity** to deal with the surge in new diagnoses and referrals due to screening
- Establishing **treatment and care guidelines, plans and protocols** to ensure fast linkage to care on diagnosis, and provision of required treatment



Treatment

- **Supporting** persons waiting for, or undergoing treatment
- Addressing **comorbid conditions** and common co-infections such as HIV and HBV
- Engaging a **specialist nurse** in infectious diseases to act as a focal point for all



Expectations

- New diagnoses of HCV infection **will rise** in the first couple of years
- Afterwards, the number of people with HCV is **expected to drop drastically**, reducing the number of new infections.
- The number of HCV-related **morbidity and mortality are expected to decrease** after a few years, since the source of the chronic liver disease would have been treated.
- The rate of new HCV infections, and the rate of HCV-related morbidity and mortality decrease, which we aim to **bring down as close to zero as possible by 2025**.





Measurement

- Treatment success is measured by achieving **SVR at 3 months post treatment completion** which usually lasts 12 weeks.
- Have recurring appointments for blood tests to ascertain that SVR is maintained.
- Testing might need to continue for **at least a year** but preferably 2 years after completion of treatment;

Monitoring & Governance

- Development of internal Action Plan
 - details all the actions under the different measures with **who needs to do what**.
 - **Includes indicators** which will be reviewed regularly to flag any issues.
 - The **measures can then be adjusted** according to need to ensure that we remain headed towards our goal of eliminating HCV as a public health threat in Malta.



Thank You

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***For information about the strategy please contact:
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