# Hepatitis C elimination requires more than universal availability of treatment

Universal availability of hepatitis C treatment is a critical but insufficient step towards elimination of hepatitis C in Australia

#### THE ISSUE

In March 2016, changes were made to the Australian Pharmaceutical Benefits Scheme (PBS) that allowed universal access to direct-acting antiviral (DAA) therapy, an efficacious and well-tolerated treatment for hepatitis C. Specialist doctors and general practitioners (GPs) were authorised to prescribe DAAs. As of April 2020, nurse practitioners have also been authorised to prescribe DAAs. It is hoped these changes will lead to elimination of hepatitis C as a public health threat in Australia by 2030.

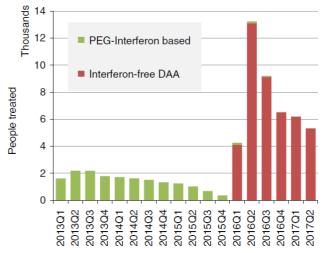
#### WHAT OUR WORK FOUND

Analysis of PBS prescription data from January 2013 to June 2017 found:

- A rapid increase in the commencement of DAA treatment (defined by the number of prescriptions dispensed) occurred following the inclusion of DAAs on the PBS. However, this level of prescribing was not sustained over time (see graph)
- ▶ 15% (n=34,952) of all people living with hepatitis C in Australia commenced treatment in 2016, the first year of universal access
- ➤ The absolute number of prescriptions written by GPs per quarter has remained stable over time
- ➤ The proportion of all prescriptions written by GPs has increased due to a decline in prescriptions written by specialists
- An increasing proportion of DAA treatment was commenced outside major cities since the introduction of universal DAA access. GPs are providing a growing proportion of hepatitis C care in these regions.

### CONCLUSION

Despite universal availability of hepatitis C treatment, the rapid initial increases in DAA prescriptions have not been maintained. Additional measures are required to eliminate hepatitis C as a public health threat in Australia by 2030.



Treatment commencement (defined by DAA prescriptions dispensed) per quarter (Q) by treatment regimen 2013–17

## **Policy Implications**

- Sustaining and improving treatment uptake will require both specialists and GPs to increase the total number of people tested and treated for hepatitis C.
- Elimination of hepatitis C will require concerted efforts to ensure that people living with hepatitis
  C can access care in community settings, in nonmetropolitan areas and through a range of prescribers.
- Elimination efforts require additional measures that focus on linkage to care and prevention of hepatitis C transmission.

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