

ELIMINATING HEPATITIS C



Burnet Institute
Medical Research. Practical Action.

ELIMINATING HEPATITIS C

PREVENTION. TREATMENT. TESTING. COMMUNITIES.

More than 70 million people globally are infected with chronic hepatitis C, a blood-borne infectious disease which can lead to complications such as liver failure and liver cancer.

Antiviral treatments, associated with cure rates of over 95 per cent, are available. But, much work still needs to be done. The World Health Organization (WHO) has set global targets to eliminate hepatitis C as a public health threat, including an 80 per cent reduction in new hepatitis C infections and a 65 per cent reduction of hepatitis C-related deaths by 2030, compared with 2015 levels.

Achieving the targets requires a multipronged approach of preventing new infections and ensuring people are tested, treated, and cured of their infection. For many countries a hepatitis C vaccine will be needed to achieve the elimination targets.

Burnet Institute's Eliminate Hep C program is playing a leading role. Building upon ground-breaking basic biomedical research, modelling and surveillance, our work aims to demonstrate the feasibility and public health benefit of eliminating hepatitis C and provides important evidence to guide the elimination response.

Our goals:

- Achieve a 50 per cent reduction in hepatitis C prevalence in Australia by the end of 2020.
- Support the achievement of the WHO's hepatitis C elimination targets in Australia before 2030 with key partners.
- Work towards the global WHO viral hepatitis elimination strategy by addressing diagnosis, delivery of direct-acting antivirals, prevention and vaccine development.

AUSTRALIA AND HEPATITIS C



By not restricting access to treatment and offering it through general practitioners and authorised nurse practitioners, Australia is a global leader in eliminating hepatitis C.



Australia is on track to be one of the first countries to achieve hepatitis C elimination.



Australia's partnership approach between key community organisations, government, the health sector and researchers to deliver care is its major strength.



People who inject drugs in Australia, a highly marginalised population who experience stigma and discrimination, account for the majority of new infections.



Australia can significantly reduce future cases by addressing social and structural barriers that often prevent those who inject drugs from accessing care.

OUR WORK

EC Australia

Coordinating a national approach to the elimination of hepatitis C.

ACCESS

The Australian Collaboration for Coordinated Enhanced Sentinel Surveillance (ACCESS), a Burnet/Kirby Institute collaboration, monitors Australia's elimination response.

HepSeeVaxDelta3™

Developing a vaccine candidate that provides protection against first time infection and reinfection after successful treatment.

Global Health Diagnostic Development

Developing point-of-care tests for liver disease and cirrhosis to streamline treatment access.

Optima Model

Providing guidance for optimal resource allocation to meet strategic objectives.

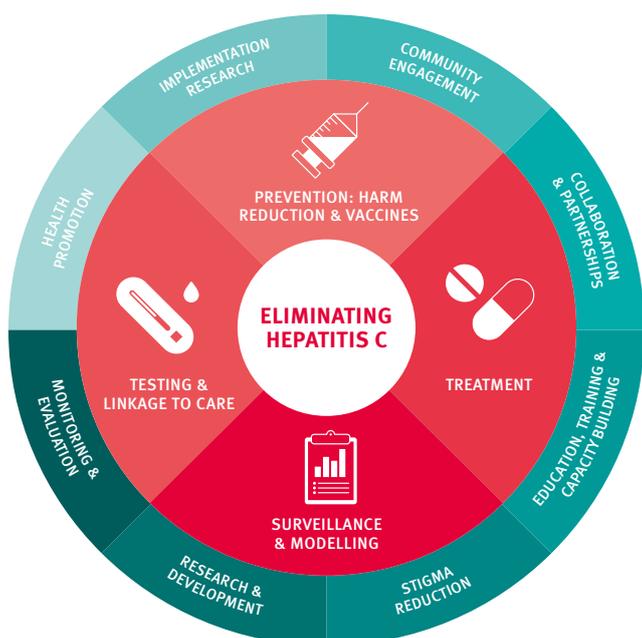
Myanmar

Undertaking innovative point-of-care test and treatment studies to increase access to care in the community clinics.

Trials

Conducting world leading community-based research to increase people's engagement in testing, care and treatment.

FOUR PILLARS OF ELIMINATION



KEY STRATEGIES

PREVENTION: HARM REDUCTION AND VACCINES

- Implement and advocate for measures to minimise hepatitis C transmission and prevent new infections in vulnerable populations.
- Advocate for development of prophylactic vaccines and standardised assays for measurement of immunogenicity (provoking an immune response).
- Accelerate our hepatitis C vaccine candidate to clinical trial by progressing our understanding of how the immune system controls and prevents hepatitis C infection and reinfection.
- Assist the global efforts to reduce unnecessary medical injections and ensure the safe supply of blood/blood product in all countries.

TESTING AND LINKAGE TO CARE

- Develop point-of-care tests for hepatitis C to determine priority of treatment in resource-poor settings.
- Increase engagement in testing and linkage to care through studies examining impact of peer and nurse led models-of-care and point-of-care testing in community settings.

TREATMENT

- Establish community-based and nurse-led hepatitis C treatment programs, and assess the feasibility of scaling-up and broadening treatment coverage in Australia to achieve elimination.
- Actively work with community groups to reduce stigma and discrimination.
- Increase our understanding and evidence for the benefits of treatment and cure.

SURVEILLANCE AND MONITORING

- Develop, implement and expand innovative surveillance systems and bio-behavioural research that enhances understanding of hepatitis C risk and protective behaviours among vulnerable populations.
- Undertake modelling to examine the most effective way to treat and prevent hepatitis C transmission among vulnerable populations, and maximise affordability.

ABOUT BURNET INSTITUTE

Burnet Institute is an Australian, unaligned, independent, not-for-profit organisation. Our mission is to achieve better health for vulnerable communities in Australia and internationally by accelerating the translation of research, discovery and evidence into sustainable health solutions.



Make a difference by donating or consider a gift in your Will. Contact us today.

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We have offices or representatives in Australia, Myanmar, Papua New Guinea and China, and also contribute to activities in other African, Asian and Pacific countries.