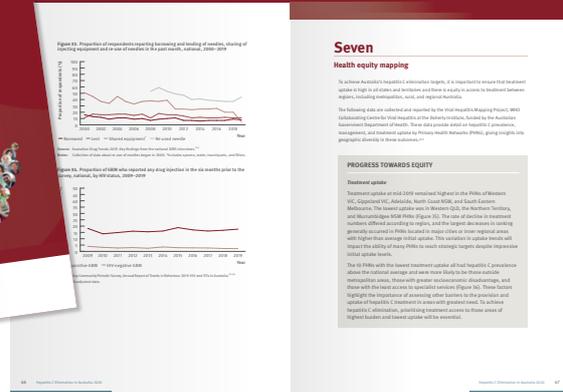




# Australia's progress towards eliminating hepatitis C as a public health threat by 2030



In Australia, the effort to eliminate hepatitis C continues, in line with global targets set by the World Health Organization and targets included in Australia's National Hepatitis C Strategy 2018–2022. Setting the goal of elimination was possible through strong political leadership enabling universal access to direct-acting antiviral (DAA) therapy and an active community of partners to implement the National Hepatitis C Strategy. Sustaining the effort to eliminate hepatitis C requires continual monitoring to identify and address challenges and barriers as we progress towards elimination.

The Burnet and Kirby Institutes have worked with research, clinical, community and government partners across the country to produce the second annual report on Australia's progress towards hepatitis C elimination. The report brings together data from over 20 separate sources across Australia, from publicly available datasets through to mathematical modelling to give an overview of Australia's progress towards hepatitis C elimination. This second annual report addressed gaps identified in the first report, and now includes data on testing and treatment among Aboriginal and Torres Strait Islander people and treatment initiation in prisons. However, gaps in our knowledge remain, and the endeavour to fill those gaps continues, in particular to collate data for all priority populations and settings.

## Summary of the report

The number of hepatitis C treatment initiations in Australia increased substantially following the listing of DAAs on the Pharmaceutical Benefits Scheme in March 2016, with approximately 82 000 people being treated with DAAs by the end of 2019. This has been accompanied by a decline in new hepatitis C infections. However, most people living with hepatitis C in 2016 are yet to be treated. Of concern, the report shows a continued decline in the number of people testing for hepatitis C and treatment uptake. Mathematical modelling based on this data suggests that without efforts to significantly increase testing and treatment, Australia will struggle to achieve hepatitis C elimination targets.

## HIGHLIGHTS

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- **NEWLY ACQUIRED HEPATITIS C INFECTIONS:** Declines in new hepatitis C infections were seen using data from primary care clinics that see people who inject drugs and gay and bisexual men.
- **DIAGNOSIS AMONG PEOPLE LIVING WITH HEPATITIS C:** Testing for hepatitis C has declined, particularly testing for hepatitis C RNA used to detect new hepatitis C infections.
- **UPTAKE OF DIRECT-ACTING ANTIVIRAL TREATMENT:** Treatment uptake peaked in the months following the listing of DAAs on the Pharmaceutical Benefits Scheme but have subsequently slowed. An estimated 29% of people treated in 2019 were treated in prison.
- **HEPATITIS C-ATTRIBUTABLE MORBIDITY:** Declines in liver transplant with hepatitis C as the primary diagnosis has occurred.
- **STIGMA AND DISCRIMINATION EXPERIENCED BY PEOPLE LIVING WITH HEPATITIS C:** Stigma and discrimination towards people who inject drugs and people living with hepatitis C remains prevalent, raising concerns about how this may be affecting individuals' engagement with healthcare.
- **PREVENTION OF HEPATITIS C ACQUISITION:** Primary prevention continues to be an important focus. Reports of receptive sharing of needles and syringes has remained stable in recent years. Prevention efforts need to increase access to sterile needles and syringes, reduce needle and syringe sharing among people who inject drugs, and expand health promotion activities.
- **HEALTH EQUITY MAPPING:** Mapping of treatment uptake across Australia shows inequity in treatment uptake and highlights the importance of ensuring equitable access to treatment in rural and remote areas.
- **MODELLING:** Simulation models highlight that increasing testing, diagnosis and linkage to care are essential for Australia to achieve its hepatitis C elimination goals.

### Future directions

Ongoing declines in testing and treatment uptake underline the urgency of facilitating access to testing, treatment and care for all people living with hepatitis C. The COVID-19 pandemic is also likely to further hamper Australia's effort to eliminate hepatitis C due to the reduction in people's ability to seek and access healthcare services. Future annual reports will aim to fill gaps in our knowledge on the hepatitis C epidemic and response among all priority populations and settings.

Find the report at: [www.burnet.edu.au](http://www.burnet.edu.au) and [www.kirby.unsw.edu.au](http://www.kirby.unsw.edu.au)