3. Fighting hepatitis – data for action and access to treatment

Viral hepatitis is a major driver of morbidity and mortality in the Western Pacific Region, and a major priority for WHO. Together, Member States and WHO have taken major steps in the right direction, particularly through hepatitis B immunization.

Already, an estimated 37 million new infections have been prevented among children born between 1990 and 2014, which will save some 7 million lives. New medicines to treat hepatitis B and cure hepatitis C provide more reasons for optimism. However, the key challenge is to ensure that those who need these treatments receive them.

The WHO Regional Action Plan for Viral Hepatitis in the Western Pacific 2016–2020 provides a systematic approach for continuing efforts to tackle these diseases. The action plan charts a path to the ultimate goal of eliminating hepatitis as a public health threat. Important progress has been made in working with countries to help them implement the action plan.

For example, in the light of developing evidence on the cost-effectiveness and feasibility of WHO-recommended medicines, China has updated national hepatitis B and C treatment guidelines. The Government also announced fast-track registration of new hepatitis C medicines. China’s National Health and Family Planning Commission negotiated lower prices for tenofovir to treat hepatitis B. The Ministry of Human Resources and Social Security revised the drug list for reimbursement to include hepatitis B treatments.

In Mongolia, disease-burden estimates, budget impact analyses and financial discussions were undertaken to help identify funding mechanisms to minimize out-of-pocket costs and to make a case for further investment in hepatitis response. Subsequently, the Government of Mongolia has included hepatitis medicines in the National Health Insurance system, which covers 98% of the population and includes reimbursement for individuals seeking treatment in both the public and private sectors.

As a result, people are now reimbursed 60% of the cost for hepatitis C drugs and 80% for hepatitis B drugs. During 2016, some 4000 people were treated for hepatitis B and 7000 people for hepatitis C.