Dear Colleagues,

On July 28th, the United States joins countries around the world to observe World Hepatitis Day. This health observance raises awareness of the silent global epidemic of viral hepatitis. Currently, 400 million persons are living with hepatitis B virus (HBV) or hepatitis C virus (HCV); 1.4 million persons lose their life to these diseases. The global hepatitis challenges are similar to those faced here in the United States, namely bringing together the highly effective vaccinations, testing, care, and treatment necessary to prevent new infections and unnecessary deaths. Constrained resources for testing and treatment, lack of provider and public awareness about viral hepatitis, limited capacity to diagnose and treat viral hepatitis, and continued transmission of HBV and HCV through unsafe injection practices also challenge global and U.S. efforts to prevent new infections and reduce viral hepatitis-related morbidity and mortality.

When resources permit, the Division of Viral Hepatitis (DVH) with the Centers for Disease Control and Prevention (CDC) expands its domestic expertise in viral hepatitis to assist countries around the world experiencing high rates of viral hepatitis, including China, Egypt, Georgia, India, Pakistan, and Vietnam. In so doing, CDC can identify best practices in viral hepatitis prevention that can be used to assist other countries facing high burdens of viral hepatitis as well as enhance prevention efforts in the U.S.

**DVH works through partnerships at the international, regional, and country level to prevent and control viral hepatitis**

The core of DVH’s global work is in lending technical assistance to governmental and non-governmental entities as they develop hepatitis-related prevention policies, respond to outbreaks, develop viral hepatitis surveillance and prevention programs, and monitor and evaluate these activities. For these efforts, DVH works with country-specific and global counterparts and partners, including local Ministries of Health and/or National Centers for Disease Control, other U.S. CDC programs, the United States Agency for International Development, the United States Department of State, and the World Health Organization (WHO).

At a global level, DVH primarily works with WHO to develop guidelines for viral hepatitis vaccination, treatment, surveillance, and modeling. DVH also supports staff at WHO’s headquarters to lead the WHO Global Hepatitis Program, which has published the first WHO guidance for HCV treatment, HBV treatment, and viral hepatitis surveillance. This normative guidance is extremely helpful to many countries seeking to develop similar guidelines.
Select Examples of DVH Global Work

Engagements in countries have largely been possible because of public-private partnerships developed by the CDC Foundation. Due to the increasing global prioritization of addressing viral hepatitis, particularly HCV, DVH responses to requests for technical support are contingent on resource availability. Below are examples of DVH global work.

China – Since 1990, DVH has assisted in the development of hepatitis B vaccination programs. Over this period, China has implemented a highly effective hepatitis B vaccination program for newborns and children that has virtually eliminated hepatitis B as an infection in vaccinated children; this low prevalence will progressively extend into older populations as these children age into adolescence and adulthood.

Egypt – Since 2011, DVH has assisted in the development and implementation of the nation’s Viral Hepatitis Action Plan. To promote adoption of the recommended activities, DVH has trained health professionals on disease surveillance, laboratory quality assurance, and infection control; future activities include monitoring the impact of the introduction of new curative treatments for HCV. With approximately 7% prevalence of HCV and about 10 million persons living with HCV, Egypt has one of the largest burdens of HCV in the world.

Georgia – Since 2013, DVH has provided technical assistance to launch a national population-based serosurvey to better understand the epidemiology of HCV assess provider and assess laboratory capacity. CDC has also helped Georgia launch the world’s first national HCV elimination plan; this launch was recently featured in the Morbidity and Mortality Weekly Report (MMWR) article, “The Launch of a Hepatitis C Elimination Program in the Country of Georgia, April 2015.”

India – Since 2012, DVH has provided technical assistance on surveillance methods and outbreak reporting. These activities were recently featured in the MMWR article, “Viral Hepatitis Surveillance — India, 2011-2013.”

Pakistan – Since 2009, DVH has assisted prevention program development to improve surveillance, laboratory testing, and prevention planning. Activities have included 1) convening a technical advisory group to provide guidance for viral hepatitis surveillance and prevention activities; 2) implementing infection control training in 25 high-risk districts; 3) developing a National Strategy for the Prevention and Control of Viral Hepatitis; 4) advising on national policies for hepatitis C treatment; and 5) supporting models of hepatitis C virus transmission to guide development of prevention strategies.

Vietnam – Since 2013, DVH assisted development and approval of the National Action Plan for the Prevention and Control of Viral Hepatitis. DVH also helped develop surveillance and HBV treatment guidelines; improve blood safety practices; increase community-level testing; and improve hepatitis B birth-dose access. DVH assists WHO’s Western Pacific Regional Office (WPRO) in assessing progress toward elimination of hepatitis B transmission among vaccinated cohorts of children and adolescents.

The Bigger Picture

Although CDC’s contribution towards global viral hepatitis prevention represents only a fraction of the initiatives underway worldwide, DVH’s expertise is highly valued around the world, and the activities undertaken by the Division in collaboration with global partners helps prevent viral-hepatitis related illness and save lives in numerous countries. Likewise, global involvement provides DVH with new perspectives on and best practices for viral hepatitis prevention --- practices that can be employed to improve surveillance and prevention programs here in the United States. Proactive prevention partnerships like those between CDC, WHO, country-specific ministries of health, and other groups working to address viral hepatitis are a win for all, paying off with considerable health dividends.
Sincerely,

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