

Monitoring the progress towards elimination of hepatitis B and C among PWID A European perspective

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EMCDDA Elimination Barometer – online resource

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Elimination barometer on viral hepatitis among people who inject drugs in Europe

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Source data

Page last updated: July 2021

About the elimination barometer

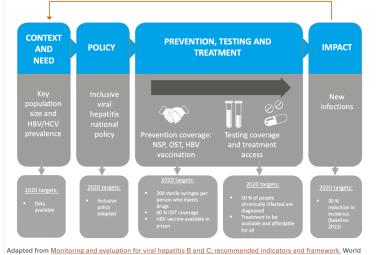
The elimination barometer for hepatitis B and C among people who inject drugs is designed to support countries affiliated to the EMCDDA in monitoring their progress towards the Sustainable Development Goal 3.3 and the elimination of viral hepatitis as a major public health threat by 2030. Under five building blocks, it brings together 10 epidemiological indicators (2019 or latest) and corresponding 2020 targets related to people who inject drugs for the EU, Norway and Turkey, following the WHO monitoring frameworks (WHO, 2016b, 2017).



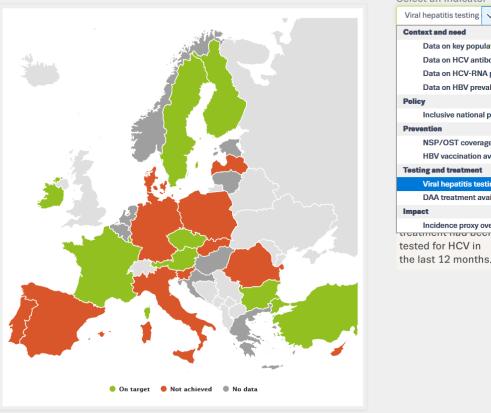
For each indicator, the EMCDDA elimination barometer provides:

- · Contextual information, references and definitions
- · An infographic showing national data
- The related 2020 WHO target
- An achievement status: how many countries have reached the target
- The corresponding data tables

Monitoring and evaluation framework: indicators to monitor and evaluate the health sector response to viral hepatitis B and C among people who inject drugs



Level of achivement for each indicator among people who inject drugs

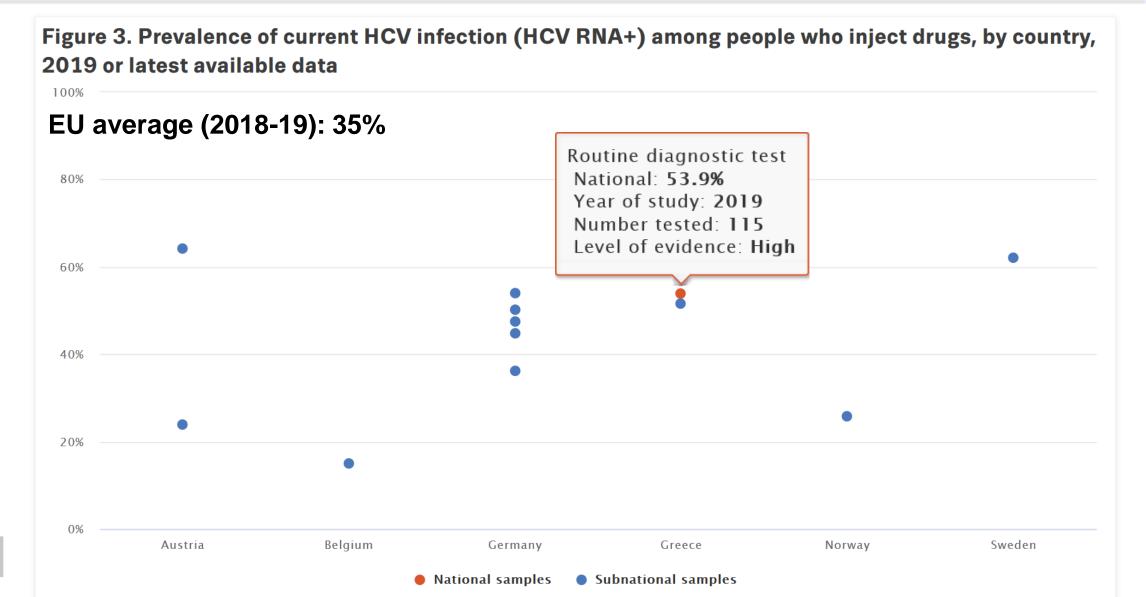


Select an indicator Viral hepatitis testing Context and need Data on key population size Data on HCV antibody prevalence Data on HCV-RNA prevalence Data on HBV prevalence Inclusive national policy NSP/OST coverage **HBV** vaccination availability in prisons **Testing and treatment** Viral hepatitis testing coverage DAA treatment availability without restrictions Incidence proxy over time treatment nau been tested for HCV in

The source data table for the main information in the interactive maps presented here is available in the <u>country-by-country overview table</u> on this page.

https://www.emcdda.europa.eu/publications/html/viral-hepatitis-elimination-barometer_en

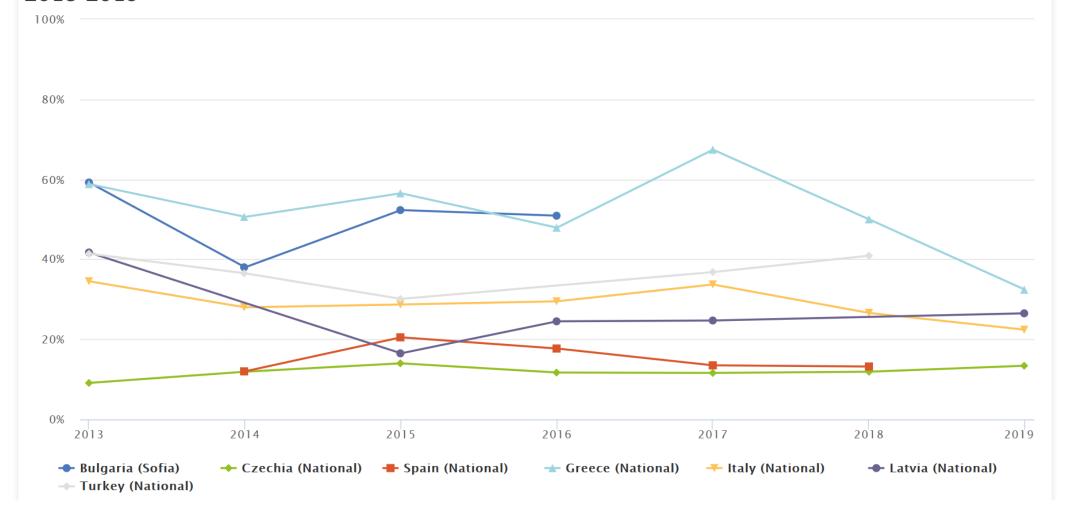
HCV-RNA prevalence EU+Norway





HCV transmission – incidence proxy

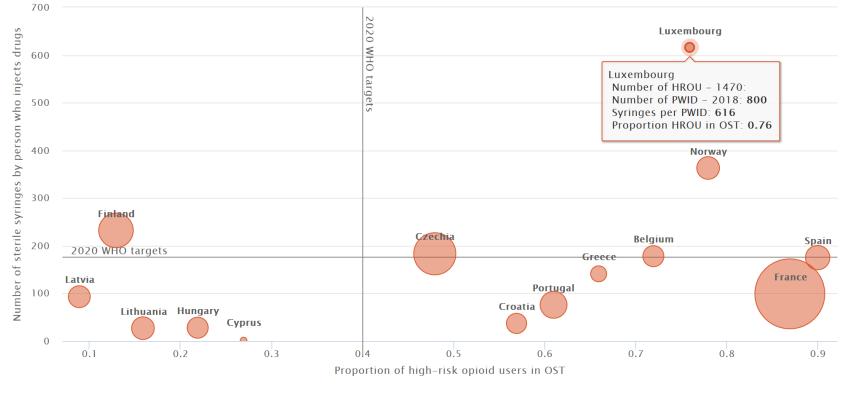
Figure 10. Trends in HCV antibody prevalence among people who inject drugs aged less than 25 years: results from diagnostic tests and seroprevalence studies with national or multi-city coverage, 2013-2019



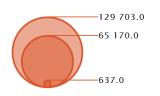


Combination prevention NSP-OST EU+Norway

Figure 6. Number of sterile syringes distributed per person who injects drugs and proportion of highrisk opioid users in opioid substitution treatment (OST), by country, 2019 or latest available data



Number of people who inject drugs





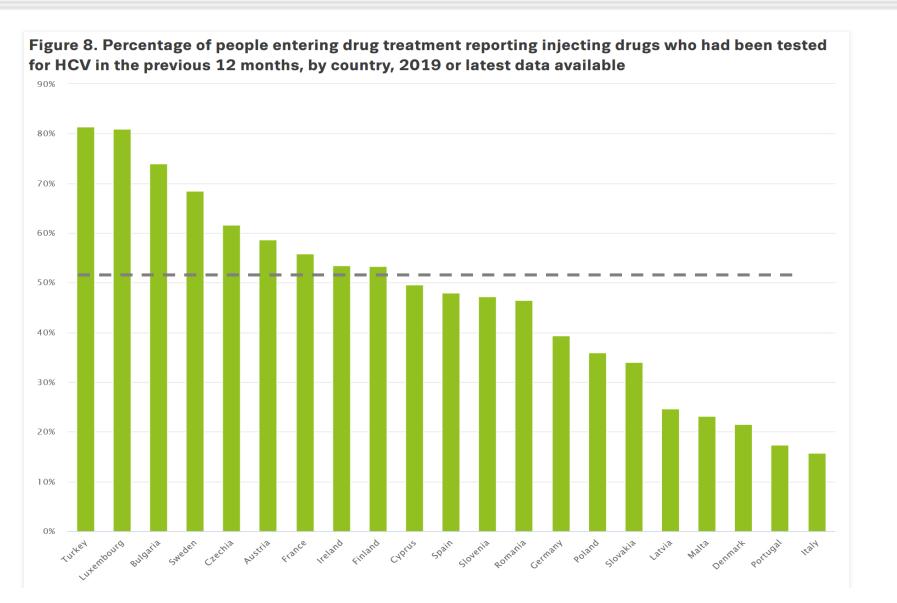
Impact of COVID-19 on drug markets, use, harms and drug services in the community and prisons

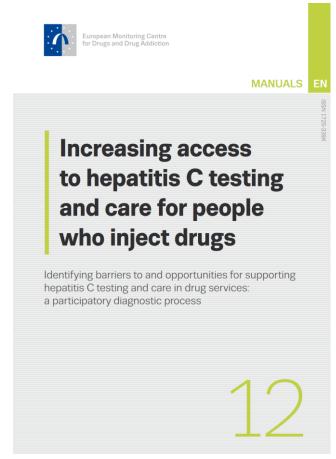
Results from an EMCDDA trendspotter study **April 2021**



https://www.emcdda.europa.eu/publications/adhoc-publication/impact-covid-19-drug-marketsuse-harms-and-drug-services-community-andprisons_en

HCV testing coverage EU+Turkey





https://www.emcdda.europa.eu/publications/manuals/manual-increasing-access-hepatitis-c-testing-and-care-people-who-inject-drugs_en

Conclusions

- The EU as a whole was below the 2020 elimination targets for PWID before the pandemic
- Any successful strategy needs to (re)emphasize harm reduction (HR) services as its cornerstone, with a decentralized, people-centred, integrated approach
- The pandemic and restrictive control measures had:
 - Initial negative impact on HR activity
 - Negative economic impact on vulnerable populations
 - Little impact on availability of (stimulant) drugs

= Increased transmission risk

 HR services are resilient, have innovated and adapted: they should be considered essential health services and receive sustainable funding if we want to collectively achieve the SDGs



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