



WHO Collaborating Centre
for Viral Hepatitis

A joint venture between The University of Melbourne and The Royal Melbourne Hospital

Updating estimates describing the burden of chronic hepatitis B in Australia

Karen McCulloch

Surveillance for hepatitis B indicators

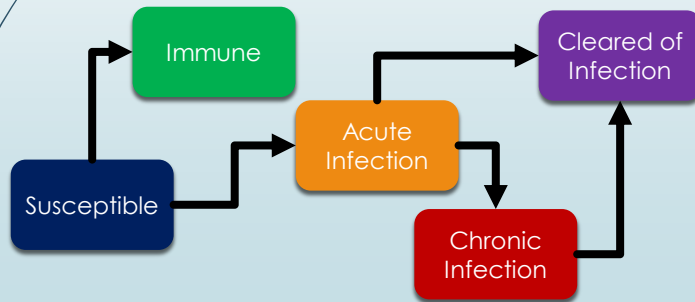
National Hepatitis B Strategy 2014-2017 identified specific measurable aims and targets including:

- Increasing the proportion of people living with CHB who are diagnosed.
- Increasing treatment uptake in those affected.
- Reducing the burden of attributable morbidity and mortality.

Model for the progression of HBV infection

Our model incorporates:

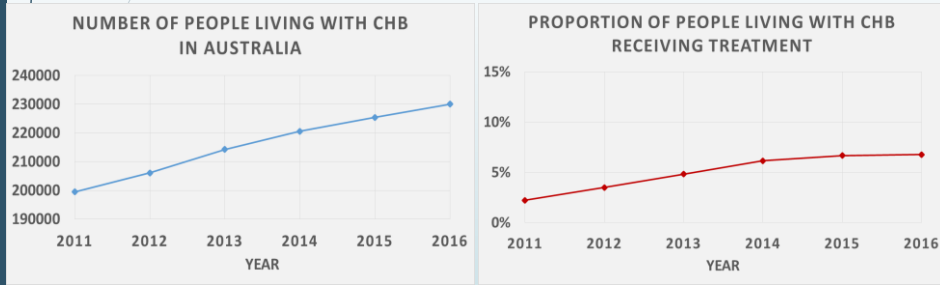
- ▀ Population demographics (births/deaths)
- ▀ Effects of age
- ▀ Vaccination
- ▀ Migration
- ▀ Mortality due to infection (acute and chronic)



Modelled estimates of the burden of chronic hepatitis B in Australia for 2016

| Indicator | Point estimate | Plausible range | | Target |
|---|----------------|-----------------|---------|------------|
| | | Minimum | Maximum | |
| Number of people living with chronic hepatitis B | 230 033 | 219 465 | 249 457 | |
| Proportion of people living with chronic hepatitis B in Australia who have been diagnosed | 62.7% | 65.00% | 58.62% | 80% |
| Proportion of people living with chronic hepatitis B who are dispensed drugs for the treatment of hepatitis B | 6.77% | 6.24% | 7.10% | 15% |
| Number of attributable deaths due to chronic hepatitis B | 412 | 400 | 437 | |

Modelled estimates of the burden of chronic hepatitis B in Australia for 2016



Model updates for 2017

- Update migration to reflect the changing levels of vaccination in source countries.
- Produce estimates by state and territory.
- Produce estimates for ATSI populations.
- Effect of treatment on morbidity and mortality.



Thanks to project members...

- Assoc. Professor Ben Cowie
- Nicole Romero
- Jennifer MacLachlan
- Dr Nicole Allard
- Kylie Carville

Contact: karen.mcculloch@unimelb.edu.au



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