



European Monitoring Centre
for Drugs and Drug Addiction

How EU agencies are taking an integrated approach to hepatitis C control

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Session F: Integration of HCV, other Co-infections and Harm Reduction Services



Disclosures

Nothing to disclose.



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EMCDDA

➤ **Our objective**

To contribute to a more secure and healthier Europe

➤ **How?**

By providing better evidence for decision making and action on drugs

➤ **For whom?**

EU Institutions, national decision-makers, Professionals in the field

➤ **Our partners**

30 National Focal Points – 28 EU MS, Turkey and Norway



Contents

1. Agenda 2030 and EU commitments towards SDG3

2. Integration between the work of EU Agencies:

- Chafea
- ECDC
- EMCDDA

3. EMCDDA activities to support to policy and practice



Agenda 2030: Global policy goals

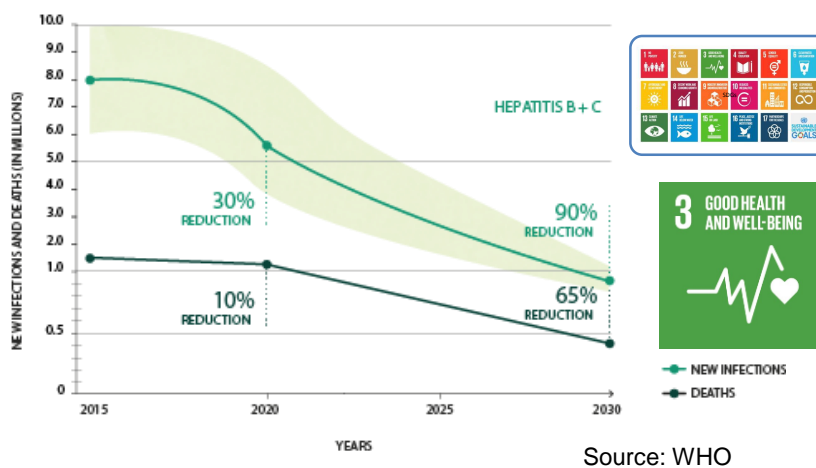


SDG 3: Ensure healthy lives and promote wellbeing for all at all ages



SDG 3: Ensure healthy lives and promote wellbeing for all at all ages: hepatitis control

- Elimination of HBV and HCV as a public health threat by 2030



EU commitments

- Setting up policy measures
Regular policy dialogue with MS and civil society

- Investment in actions on the ground:

Chafea: development of good practices
ECDC and EMCDDA: specialist agencies surveillance, monitoring and prevention resources for policy and practice



“The Commission will contribute by monitoring, reporting and reviewing progress towards the Sustainable Development Goals in an EU context”

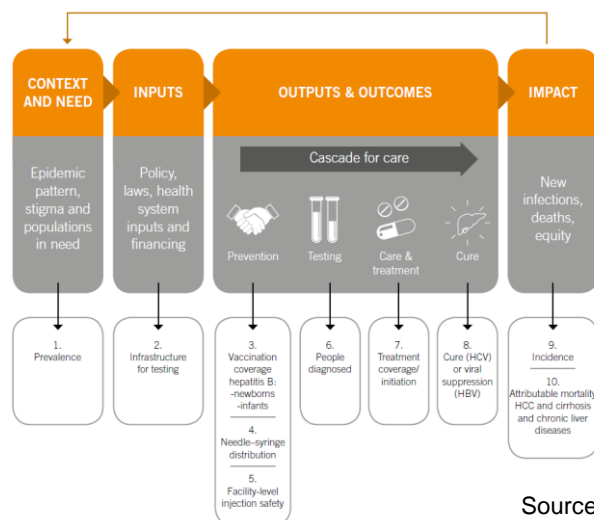


Chafea



EU contribution to monitoring

- WHO Monitoring and Evaluation framework viral hepatitis B&C



Source: WHO

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ECDC EU monitoring platform

- ECDC EU hepatitis B&C monitoring platform

- Epidemic context (4)**
 - Prevalence
 - Co-infection
 - Size of key population
- Prevention (15)**
 - Vaccination
 - Prevention of mother to child transmission
 - Infection prevention and control in healthcare settings
 - Blood safety
 - Prevention of sexual transmission
 - Prevention among people who inject drugs
- Cascade of care (14)**
 - Testing
 - Treatment
- Impact (3)**
 - Incidence
 - Mortality

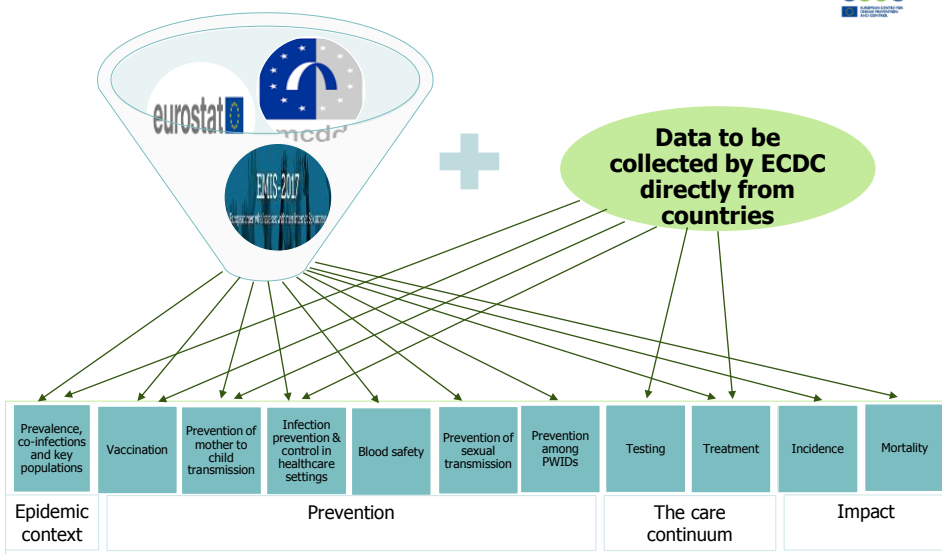
Source: ECDC

- European coverage targets, Source: WHO Europe

Indicator	2020 Target
HEPB3 coverage	95%
HBV vaccine birth dose coverage, or other approaches	90%
Donations screened with quality assured methods	100%
Proportion of injections with safety engineered devices	50%
Injection kits distributed/year/PWID	200
% HBV/HCV-infected diagnosed	50%
% HBV diagnosed on treatment / % HCV diagnosed started treatment	75%



The model for monitoring hepatitis B and C



Source: E Duffell, ECDC

Aims in developing an EU monitoring platform for hepatitis B and C



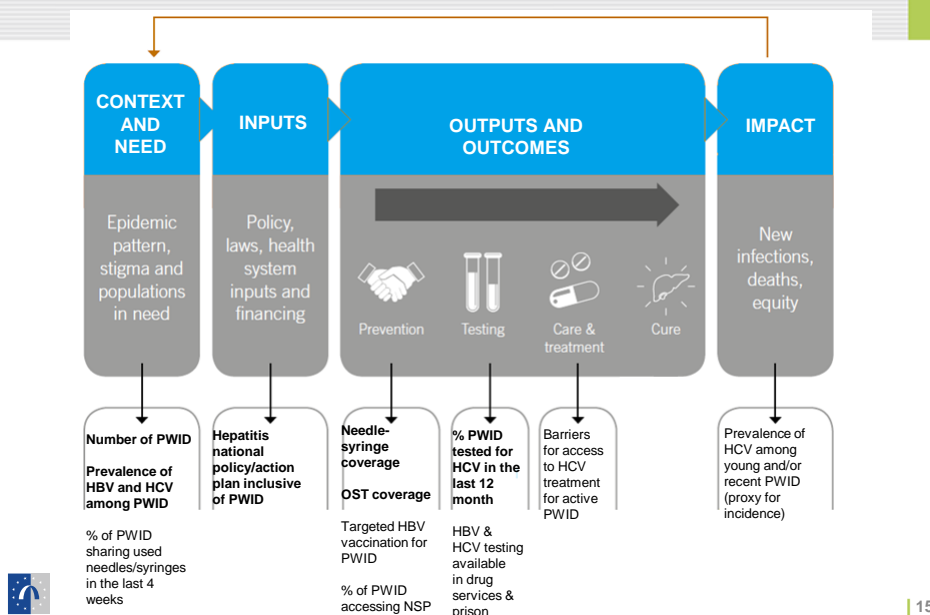
1. To support EU/EEA countries in monitoring their responses to tackling the epidemics of hepatitis B and C
2. To collect robust information to guide the European Commission, European Agencies and other organisations in working together to support countries achieve the goal of elimination

Source: E Duffell, ECDC



EMCDDA

PWID specific-indicators: 'Barometer'



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Further related EMCDDA activities

- Key-indicator capacity building: PDU, DRID, TDI
regular expert meetings and technical trainings
- Analysis of HCV policy landscape re PWID
results will be presented tomorrow 11.15h Workshop Sala XII
- EMCDDA initiative to promote testing in drug treatment settings
supporting the implementation of EU min Standards
See Poster 63: Identifying barriers to testing
- Collaboration with ECDC on public health guidance
See Poster 65: HCV treatment / BBV prevention in prison



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Promoting testing as minimum standard

2015 EU Council Decision on minimum quality standards in demand reduction (minimum benchmark of quality for interventions)

'... Treatment services [should] provide voluntary testing for blood borne infectious diseases, counselling against risky behaviours and assistance to manage illness.'

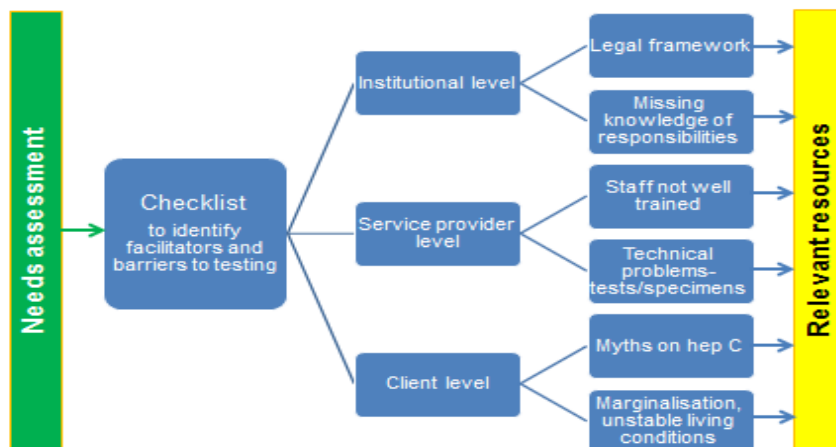


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Identifying barriers to testing of PWID

Diagnostic process/ mechanism concept



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Elaboration of guidance and other resources



Lessons learnt and challenges experienced

**Learning from HIV:
Monitoring supports
evidence-based policy
development;**

**Better cooperation
between stakeholders**

**Experienced EU project
partners provide
continuity**

**Investment in drug
monitoring needs
scaling up ('problem
solved' attitude)**

**Ongoing EU policy
commitment and
funding for actions at
ground level necessary
to spread good
practices**





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