Vanuatu Test and Treat Approach of Hepatitis B toward Elimination of Mother - to - Child - Transmission.

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MINISTRY OF HEALTH
GOVERNMENT OF VANUATU

Disclosures of interest

- The presenter and all contributors declare no conflicts of interest.

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Overview

- Vanuatu: Country context
- Levels of care in the Vanuatu Ministry of Health
- Decentralisation of antenatal care services
- Addressing mother-to-child transmission of Hepatitis B
- Hepatitis B situation in Vanuatu
- What has happened so far
- What is happening now? HBsAg-positive mothers at first antenatal visit
- Key challenges

Acknowledgement

I want to begin my presentation by acknowledging people living with viral hepatitis in Vanuatu who have participated in this research. I also would like to acknowledge all the health workers and collaborators working to improve hepatitis B care in the country. Our fight against viral hepatitis elimination is indebted to people living with viral hepatitis both past and present.

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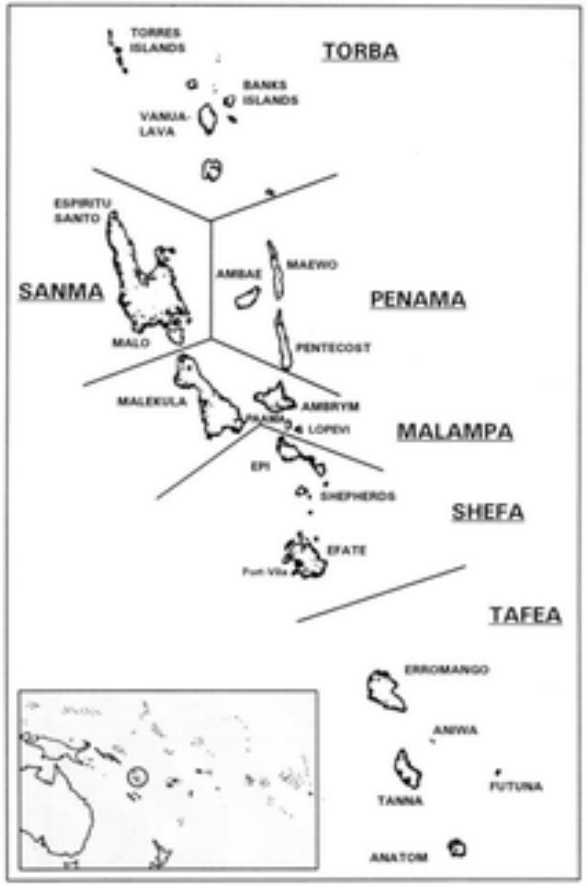
MAP OF VANUATU



Vanuatu – Country Context

- Vanuatu is an island nation made up of around 80 islands, of which around 60 are inhabited
- It lies east of Australia, northeast of New Caledonia, and west of Fiji
- The population is about 330,000
- Vanuatu is predominantly Indigenous Melanesian
- Bislama, English, and French are the official languages
- The indigenous people are referred to as Ni-Vanuatu
- Vanuatu is divided into six provinces: Torba, Sanma, Penama, Malampa, Shefa, and Tafea

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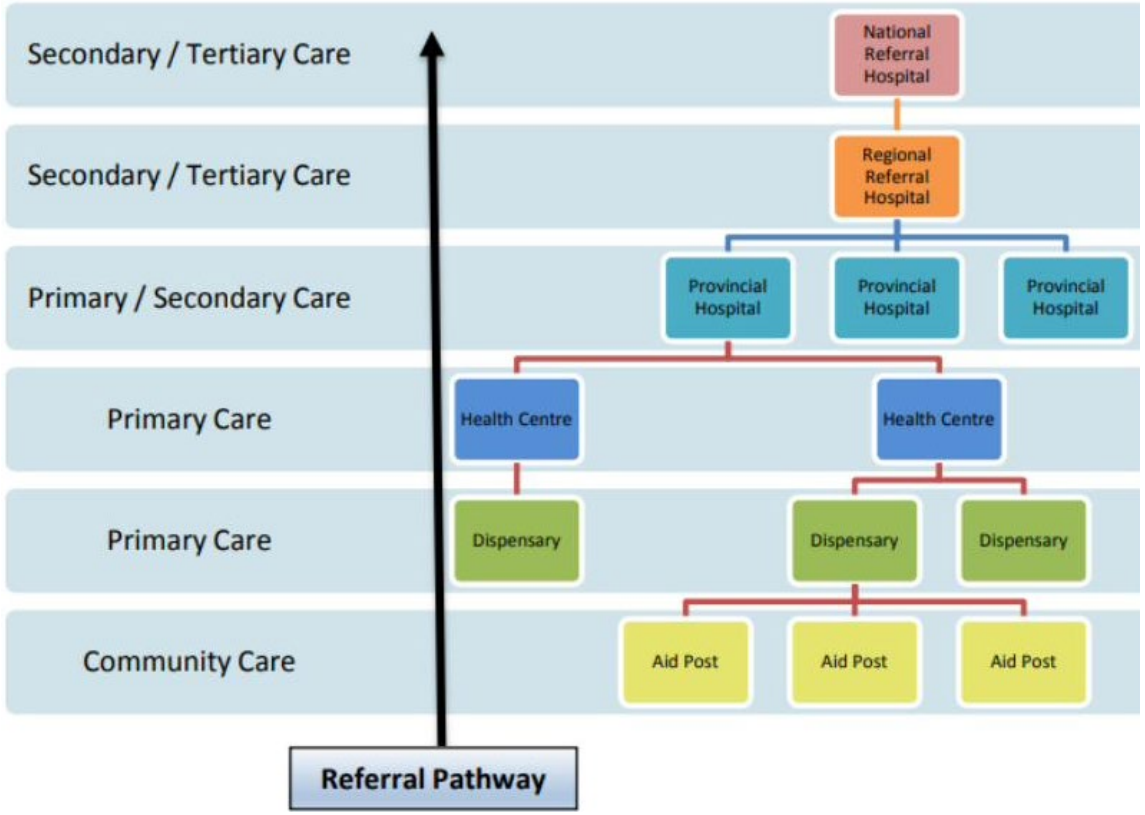
Levels of Care in the Vanuatu Ministry of Health



- Four levels of health services within the Vanuatu MoH.
- Antenatal care services(ANC) delivered through all levels of care. However, first antenatal visit should be provided at primary care facilities.
- Many facilities are not fully staffed according to the MoH Role Delineation Policy.

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Decentralization of ANC services

- In 2022, ANC services were moved to community-based health facilities, however some ongoing care at hospitals.
- Since 2024, the lab has trained ANC nurses to perform on-site HBsAg testing, and to date nurses from three provinces – Shefa, Sanma, and Tafea have successfully completed the training.
- HBV viral load testing performed in the regional hospital and one provincial hospital and Vanuatu National Hospital only.
- Since 2025, all provincial hospitals have the capacity to perform LFTs and FBE

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Addressing mother-to-child transmission of hepatitis B in Vanuatu

- Mother-to-child transmission is a priority area for intervention by the Ministry of Health Vanuatu to reach the WHO's EMTCT impact targets to have HBsAg prevalence in children under five to 0.1% or lower.
- The focus is on improved vaccination coverage and increasingly antiviral prophylaxis treatment of pregnant women

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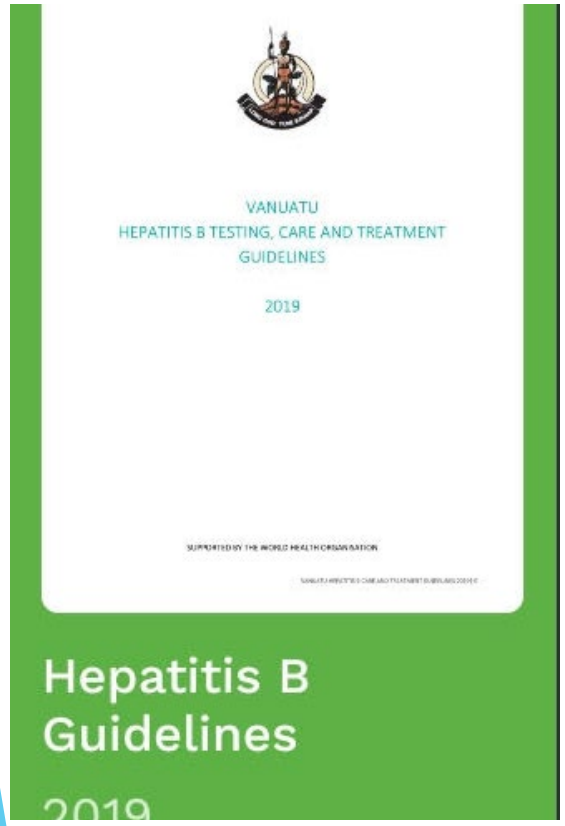
Hepatitis B situation in Vanuatu

- Chronic HBV prevalence is high: ~9% of the population (~29 000 people) living with chronic infection
  - ~5% prevalence among women of reproductive age and ~3% in children under five, indicating ongoing mother-to-child transmission.
- HBV vaccination was introduced in 1990 in Vanuatu
- Hep-BD and three doses of hepatitis B vaccine have been on the vaccination schedule for several decades.
- Vaccine coverage of Hep B birth dose in 2025 was 76%, and 77% third dose coverage (HepB3)
- Antenatal guideline recommends HBsAg testing at first antenatal care visit. Total ANC1 coverage was about 10,000 in 2025.
- The 2024 guideline recommends treatment on HBsAg positive pregnant women from antenatal care with high viral load and other people with indications for treatment.

Developments in hepatitis B testing and treatment



- Since 2013
  - HBV viral load testing was introduced
  - Alpha feto protein test was introduced
  - Addition of the anti-viral therapy into the NEDL-Tenofovir
  - Rolling out Tenofovir treatment to Lenakel Hospital, NPH, Lolowai Hospital and Norsup Hospital
- Since 2024, HBsAg testing has been implemented in health centres and dispensaries where ANC services are provided in Shefa, and expanded to Sanma and Tafea in 2025
- The national strategic plan was endorsed in 2026 with technical advise from Doherty Institute, and updated Hepatitis B guideline is being drafted.

What is happening now?
HBsAg positive at first ANC visit

- Routine care:
  - HBsAg testing usually occurs in hospital laboratories, but the MoH is working to decentralise testing to community-based health facilities.
  - Counselling on importance of in-facility birth and vaccination
  - Limited to no onward referral for assessment and treatment for women not involved in the field trial.
- Test and treat trial (*Protektem Pikinini Blong Yu* field trial)
  - HBsAg testing is conducted directly in participating heath facility
  - When a pregnant woman tests positive for HBsAg, the midwife initiates treatment, then refers her to the Medical Clinic, where she is enrolled in the program for follow-up and management
  - This is regardless of HBV DNA levels

Challenges

- HBV viral load not available in all hospitals
- There is no testing for HBeAg or immunoglobulin in any of the six labs
- Late presentation to ANC
- Due to financial, resourcing and supply chain constrains, expanding and maintaining HBsAg testing in the health centers and dispensaries is a challenge

Opportunities for Strengthening PMTCT

- There is ongoing research supporting the initiation of treatment for HBsAg-positive pregnant women without requiring HBV viral load testing, ensuring timely access to PAP especially since viral load testing is not often available.
- Findings will help inform policy changes to strengthen Prevention of mother – to – child transmission efforts.