

September 2017

HCV Action brings together hepatitis C health professionals from across the patient pathway with the pharmaceutical industry and patient representatives to share expertise and good practice.

News & reports...

* [HCV Action](#) will host its fourth ODN workshop of the year with the Lancashire & South Cumbria ODN in Preston on 11th October. The workshop will bring together clinical staff from the region for a focused discussion on how to address local challenges in hepatitis C care alongside the ODN's regular meeting.

* The first global review to quantify the impact of needle and syringe programmes (NSP) and opioid substitution treatment (OST) in reducing the risk of hepatitis C infection has been published in the journal [Addiction](#). The study found strong evidence that OST reduces the risk of hepatitis C infection by 50%, and by 74% when combined with high coverage NSP. Read a summary of the study [here](#), and the full report [here](#).

* A US study published by [Clinical Infectious Diseases](#) has found that in communities with a high prevalence of people who inject drugs, it is cost-effective to routinely screen young adults for hepatitis C in primary care settings. The study compared routine testing at urban community health centres to targeted risk-based testing ordered by physicians, finding that routine counsellor-initiated testing was cost-effective in areas where the prevalence of people who inject drugs was greater than 0.59%. Read the article [here](#).

APPG on Liver Health launches inquiry into hepatitis C elimination

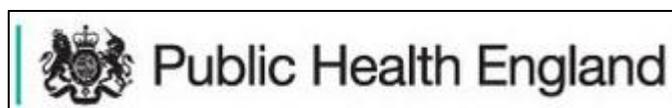


The All Party Parliamentary Group (APPG) on Liver Health has launched an inquiry into hepatitis C elimination. The APPG will host three oral evidence sessions in Parliament where key stakeholders will provide their perspectives on the practical and strategic changes needed to move towards elimination of hepatitis C in England. A limited number of observer places for the Parliamentary evidence sessions are available, with details on how to reserve a place [here](#).

In addition to the three oral evidence sessions, the APPG is calling for written evidence from individuals and organisations to contribute their perspectives on how the elimination of hepatitis C can be achieved in England. The deadline for submission of written evidence is the 27th October, and further guidance can be found [here](#).

On the basis of the received evidence, a 'blueprint for elimination' will be produced, providing an overview of the evidence received, and setting out some of the practical steps that can be taken to ensure the elimination of hepatitis C as a serious public health concern in England.

PHE publishes new liver disease atlas, showing major variation across England



Public Health England has published its second atlas of variation in risk factors

and healthcare for liver disease in England. The report finds a wide variation in the rate of people dying prematurely from liver disease, with deaths from liver disease in some parts of England almost eight times higher than in others.

There has been a reduction in premature deaths as a result of liver disease nationally, but many other key indicators have worsened. Hospital admission rates for cirrhosis have doubled over the past decade, with a cirrhosis rate 8.5 times higher in some regions than others.

The report highlights the impact of inequalities on increased liver disease risk factors like alcohol consumption, obesity, and hepatitis B and C, contributing to the significant regional variation in deaths from liver disease.

* A Taiwanese study published in [Clinical Infectious Diseases](#) found that DAAs are both safe and highly effective among patients who received heart transplants. The reported prevalence of HCV among heart transplant recipients is between 7 and 18%, and this is the first study to evaluate the safety of DAAs specifically for this group. See the full study [here](#).

* Research conducted in Sweden and published in [Lancet Psychiatry](#) found that people with severe mental illness are 6.18 times more likely to have hepatitis C than people without mental illness. The study used longitudinal data from over 6 million Swedish adults. It found that substance misuse was the greatest contributing factor to the increased prevalence of hepatitis C in this population. Read a report of the study [here](#).

* In a speech at the Expo conference in Manchester on the 12th September, NHS England Chief Executive Simon Stevens [emphasised the Health Service's commitment](#) to invest in 'revolutionary new treatments' for hepatitis C. Mr Stevens highlighted initial evidence that deaths from hepatitis C are beginning to decrease in the United Kingdom due to the cost-effective DAA treatments.

* A study in [Clinical Infectious Diseases](#) found that women who inject drugs are at a 38% greater risk of contracting HCV than men who inject drugs. The study used a large international set of data on high-risk cohorts to calculate the female to male hazard ratio for hepatitis C incidence. Multiple factors, including biological differences, social networks and variation in access to prevention services were found to contribute to increased susceptibility among women. The study can be read [here](#).

* A conference organised by the [International Network of Hepatitis C in Substance Users \(INHSU\)](#) in New York called for people who

The report includes a section on the rates of hepatitis C infection by region, showing a 5.5-fold variation in hepatitis C prevalence between some regions.

You can read a Government press release summarising the report [here](#), and see the full report in the [HCV Action](#) resource library [here](#).

London Joint Working Group on Substance Use and Hepatitis C hosts 7th annual conference



The London Joint Working Group on Substance Use and Hepatitis C hosted its 7th annual conference entitled 'Leading London to Hepatitis C Elimination' on 26th September 2017.

A morning session focused on 'strategic decision making and action' featured speakers from NHS

England, Public Health England, and the World Health Organisation. Speakers discussed challenges and opportunities for eliminating hepatitis C in London, addressing hepatitis C through NHS sustainability and transformation plans, and the international perspective on tackling hepatitis C.

The next section of the conference, 'interventions for impact', featured presentations about the experience of family members of people diagnosed with hepatitis C, understanding barriers to data collection and onward referral and the opportunities and aspirations for elimination by 2030. Speakers also shared perspectives on active case finding through pharmacy testing and reaching the the prison community and homeless population.

For the final portion of the day, attendees split into three workshops led by London ODN leads to discuss different aspects of the hepatitis C care pathway. A summary report of the event will be available on the [London Joint Working Group's website](#) soon.

HCV Action and PHE host second Hepatitis C Good Practice Roadshow of 2017 in Leeds



HCV Action and Public Health England hosted their second Hepatitis C Good Practice Roadshow of 2017 in Leeds on Wednesday 6th September.

The roadshow brought together around 70 people, including clinicians, nurses, drug and alcohol service workers, prison health professionals, and others working around hepatitis C in West Yorkshire.

The roadshow's morning sessions included overviews of current opportunities and challenges surrounding hepatitis C and updates on the latest treatment options and data from experts, including Dr Mike Gent, Madeline Cox, Dr Mark Aldersley, and Dr Michael Gregory.

use drugs to be prioritised in international treatment efforts. Experts presenting at the conference highlighted a 'treatment as prevention' approach, emphasising the importance of integrating hepatitis C treatment with harm prevention programmes and care pathways. A news story about the conference can be found [here](#).

Share your good practice...

If you would like your service to be featured as a good practice case study on the HCV Action website, please send an email to hcvaction@hepctrust.org.uk.

We want to keep HCV Action's membership updated on news and events from across the country.

If you have any news you would like to share with colleagues or would like to publicise an event please email details to hcvaction@hepctrust.org.uk.

Examples of local good practice in prisons and community outreach were presented by Dr Iain Brew and Catherine Wigglesworth, with Rachel Halford sharing examples of good practice from elsewhere in the UK. Peter Griffiths shared his experience of diagnosis and treatment as a hepatitis C patient.

The afternoon workshops allowed participants to choose a focused area of interest to discuss local challenges in smaller groups. These topics included the work of Operational Delivery Networks, awareness and testing in drug services, and hepatitis C in South Asian communities.

Full slides presented by each speaker can be found in the HCV Action resource library [here](#), and a summary report will also be available shortly.

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