

Press Release

1. October 2014

The number of people living with HIV and hepatitis is on the rise in Europe

There is an urgent need to change our strategy for testing for HIV and hepatitis in Europe. The number of people infected is increasing and many are still not aware that they are infected. The problem is greatest in Southern and Eastern Europe, but it is also an increasing problem in other European countries, and new testing strategies are therefore required. Late diagnosis means a higher mortality rate, greater risk of onward transmission and increased financial costs.

More than two million Europeans are HIV positive. About 15 million adults are infected with hepatitis C and 13 million with hepatitis B. Most of these people are unaware of their infection. The lack of knowledge about their own infection means that most people are treated too late, and that a great number of people have HIV for many years before infections are discovered. In order to reverse this upward curve, there is an urgent need for European health authorities to change strategy in order to provide HIV and hepatitis testing to far more people than today.

Coupling of two widespread infections

Experience shows that challenges in connection with diagnosing HIV and hepatitis patients have many overlaps. This topic will be debated at a conference in Barcelona on 5-7 October 2014. The 'HIV in Europe' initiative, coordinated by CHIP, a research unit under Rigshospitalet, is co-organising the conference.

"This is the first time Europe has succeeded in bringing together experts in the strategic approach to testing for HIV and viral hepatitis at a common conference. The organisers of the conference are very pleased that this is now taking place. This conference will allow us to inspire each other so that together we can enhance the knowledge about population health we need to reduce infection, and so that the people already infected can be offered better treatment than today," says Professor Jens Lundgren, DMSc, from the Department of Infectious Diseases and Rheumatology at Rigshospitalet, Denmark.

Data from a large European multicentre study which will be presented during the conference shows that the number of people infected with HIV who are tested too late, i.e. after they should have commenced treatment, is unchanged and even slightly rising in some sections of the population. A definition of when a patient is diagnosed with HIV too late – late presenters - has existed since 2010, and has made it easier to follow the epidemic and the effects of testing strategies. A similar definition for late diagnosis of viral hepatitis B and C will be presented for the first time at the conference.

Political decision on testing

History shows that there are several barriers to making testing more widespread. In most European countries, it is not worthwhile testing everyone, neither for HIV nor for viral hepatitis, but this raises the question: who should then be tested?

"Our ambition is to create a common European understanding of which tools to use in order to target testing strategies. As a European structure, we recommend the parameters to be considered, and the conference will discuss different approaches to testing for HIV and viral hepatitis. The authorities must take action, and nothing will happen if the health authorities in the various countries do not make firm decisions. Therefore, this is a political decision," says Brian West, co-host of the conference and Chair of the European AIDS Treatment Group (EATG).

Barrier: Expensive treatment

Currently, treating a hepatitis C patient costs about € 95.000 per patient, and therefore no countries can afford to treat everyone with this infection.

"In many countries we can cure a hepatitis C patient in 12 weeks, however the challenge in this is that the costs of treatment per patient are very high. Yet we expect the price of treatment to fall drastically within the next 5-10 years, and then it will probably be worthwhile curing all infected people, so they significantly reduce their risks of hepatic but also extra-hepatic HCV-related mortality at the individual level. At population level this will significantly reduce HCV transmission to uninfected population. This strategy requires that we know who are infected, and this takes us back to developing a better testing strategy. This work needs to begin now, as it takes time to develop and introduce strategies," says Stanislas Pol, representing the European Association for the study of the Liver at the HepHIV2014 Conference.

According to Professor Pol, it will be possible to eradicate hepatitis C when it is possible to identify who in the population are infected, and to treat them. However, there is still some way to go before we reach that level.

For further information, please contact:

Dorthe Raben, Tel. +45 61 70 82 60, email: dorthe.raben@regionh.dk

Read more about the conference HepHIV 2014 here:

<http://newsite.hiveurope.eu/Conferences/HepHIV2014-Conference>

Read more about European HIV testing week 2014 here: <http://www.hivtestingweek.eu/>