

NEWS

Hepatitis C could be virtually eliminated by 2030, experts believe

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London

Hepatitis C may no longer be considered a serious public health concern within the next few decades if new drugs are as effective as early signs have shown and concerted action is taken to diagnose the condition in more patients so that they can be treated, experts in the field have predicted.

Mark Thursz, professor of hepatology at Imperial College London, told a press briefing organised by the Hepatitis C Trust on the eve of the 2014 International Liver Congress in London, “The treatment environment for hepatitis C has been revolutionised in the last few years.”

Charles Gore, chief executive of the Hepatitis C Trust, told journalists that these drug advances could put his charity out of business by 2030. Reflecting on the prospect of virtually eliminating hepatitis, he said, “You don’t get many opportunities in health to do something like this.

“Currently less than 3% of people living with hepatitis C achieve cure each year, due to low treatment rates and limitations with current treatments. New, more effective treatments are one part of the solution, but we still need to ensure that people are being diagnosed and that they reach their doctors to be given the opportunity for cure,” Gore added.

Thursz said that sofosbuvir, which was licensed this year,¹ and other drugs such as simeprevir and daclatasvir, which are expected to follow suit soon, were “really good news for patients because we’re now moving into an era of all oral therapy.” He added that the new drugs were showing a cure rate of 95%.

“Treatment durations using the new drugs can be pretty short—8 or 12 weeks,” said Matthew Cramp, a consultant hepatologist at Plymouth Hospitals NHS Trust. “And so far resistance has not emerged as a problem, even when using very potent combinations.”

The development of epidemiological models of hepatitis has allowed clinicians to predict the effect of new treatments.² “If we continue as we are,” said Cramp, “the model suggests we’ll see a slow fall in the prevalence of hepatitis C in England from the present level of 144 000 down to a little over 80 000 by 2030.” With the new drugs and a greater effort to find patients and diagnose the condition, in a best case scenario the figure could be as low as 6 000.

“To diagnose more people we need more public awareness and targeted screening campaigns,” Thursz said, adding that treatment needed to be moved out of specialist centres and into settings where people could access it more easily. Cramp also emphasised the need for a more active case finding strategy. “We’re going to have to increase the rate of new diagnoses to about 15 000 per year by 2018,” he said, but he believed that this was feasible.

The opening of the 2014 International Liver Congress also saw the publication of new World Health Organization guidelines on hepatitis C. These made nine key recommendations including the need to increase the number of people screened for hepatitis C infection—a policy goal closely in line with the argument advanced by the Hepatitis C Trust.³

- 1 European Medicines Agency. Sovaldi: European public assessment report. February 2014. www.ema.europa.eu/docs/en_GB/document_library/EPAR_-_Product_Information/human/002798/WC500160597.pdf.
- 2 Wedemeyer H, Duberg AS, Buti M, Rosenberg WM, Frankova S, Esmat G, et al. Strategies to manage hepatitis C virus (HCV) disease burden. 8 April 2014. <http://onlinelibrary.wiley.com/doi/10.1111/jvh.12249/abstract>.
- 3 World Health Organization. Guidelines for the screening, care and treatment of persons with hepatitis C infection. April 2014. <http://who.int/hiv/pub/hepatitis/hepatitis-c-guidelines/en/>.

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