

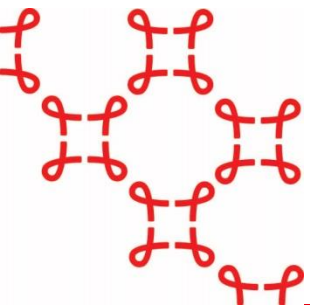
# 4th International HIV/Viral Hepatitis Co-Infection Meeting

**The Rocky Road to Viral Hepatitis Elimination:**  
Assuring access to antiviral therapy for ALL  
co-infected patients from low to high income settings

Saturday - Sunday, 22-23 July 2017

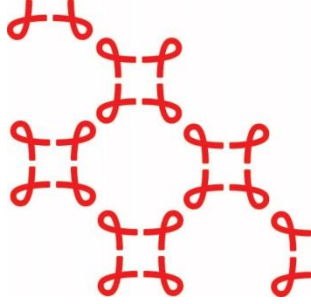
Paris, France

Tracy Swan

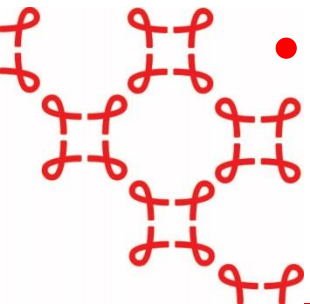




# Overview

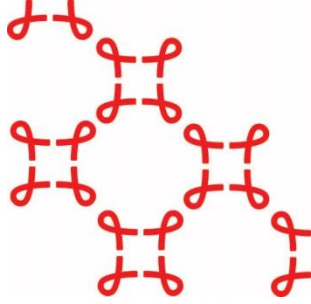


- **HCV prevention, diagnosis, treatment –where we are, what we need**
- **HCV in 2015**
- **Net cure rate (2016)**
- **Access pathways for LMICs (also relevant to HICs)**





# Prevention: bring harm reduction to scale



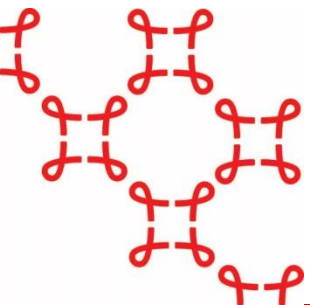
## As of 2016:

only 12 countries provide the number of syringes/needles recommended by WHO

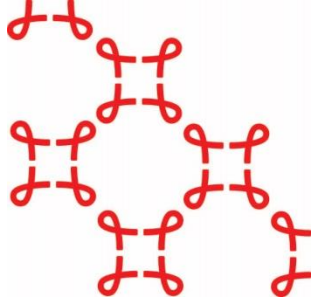
-90 countries have implemented NSP

-80 countries have implemented OST

-the extent/coverage vary, and scale-up has stalled since 2014



Global State of Harm Reduction Report, 2016;  
People who inject drugs and HIV; AVERT 2017.

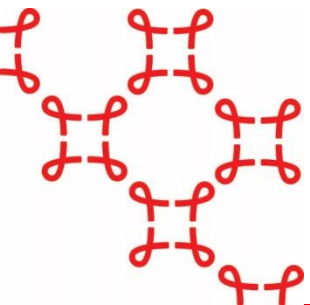


# **No one left behind: treatment access for people who inject drugs**

HCV prevalence among HIV-positive people who inject drugs:  
**~82%**

Clinical barriers are beginning to fall away: DAA trials confirm similar adherence, SVR, guidelines recommend treating

## **Structural barriers remain**

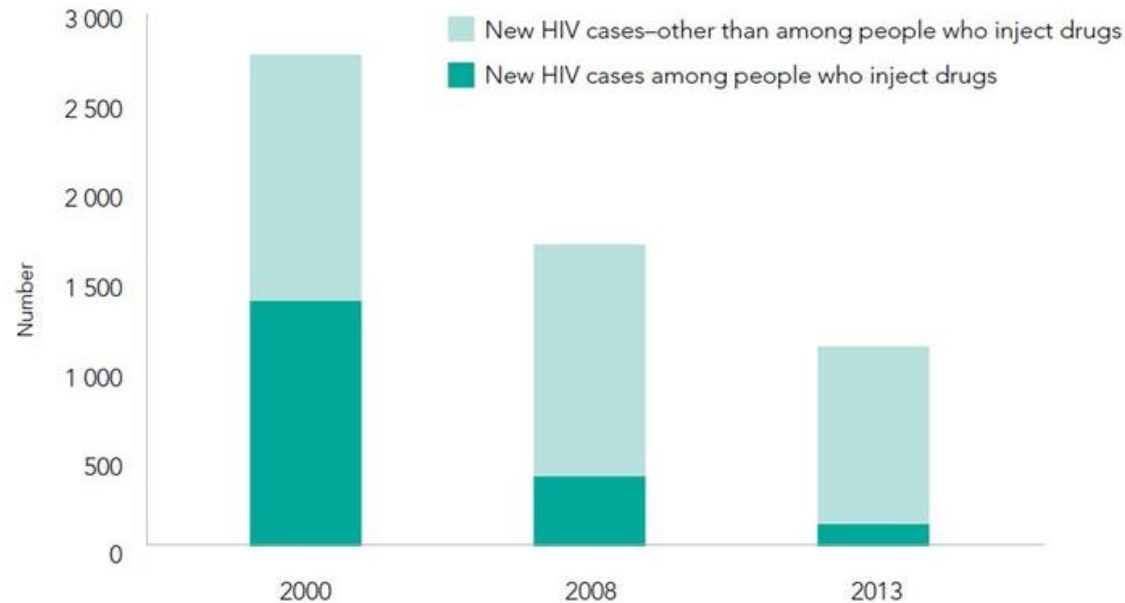


Platt et al; Lancet Infect Dis 2016; Dore, et al; Ann Intern Med 2016; Grebley, et al; EASL 2017



# Removing Structural Barriers

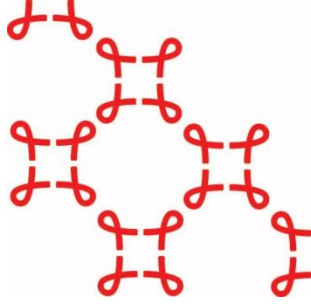
Number of people newly diagnosed with HIV in Portugal since the decriminalization of drug use, 2000–2013



Source: Domoslawski A. Drug Policy in Portugal: the benefits of decriminalization drug use. Warsaw: Open Society Foundations; 2011.



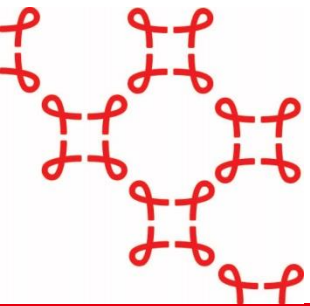
# Diagnostics & Treatment



Room for improvement in diagnostics – simple, one-step, rapid, accurate, affordable, etc

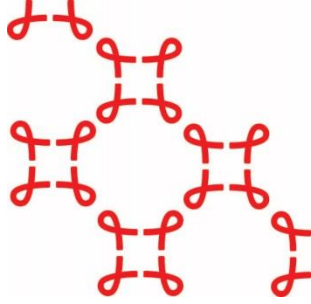
DAAAs/regimens meet the TPP-

Need more info on existing regimens/drugs  
(pregnancy, paediatrics, strategies for HIV/HCV/TB)





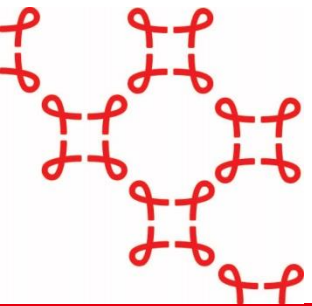
# Epidemiology



**In 2015:**

**71 million people had chronic HCV**

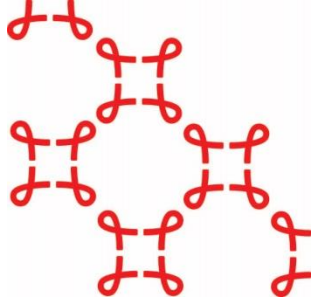
**(1.75 million of them were newly infected)**



World Health Organization. Global Hepatitis Report, 2017



# Impact of DAAs and mortality in 2015



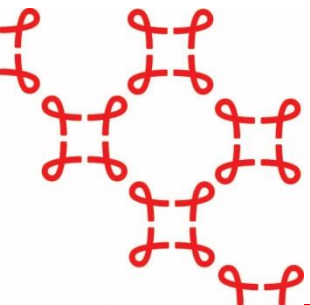
**500,000 people treated with DAAs**

**450,000 cured (based on 90% SVR and F4 priority)**

**399,000 people died from HCV complications**

**849,000 people were cured, or died**

**1,300,000 more new infections than cures**

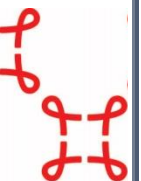
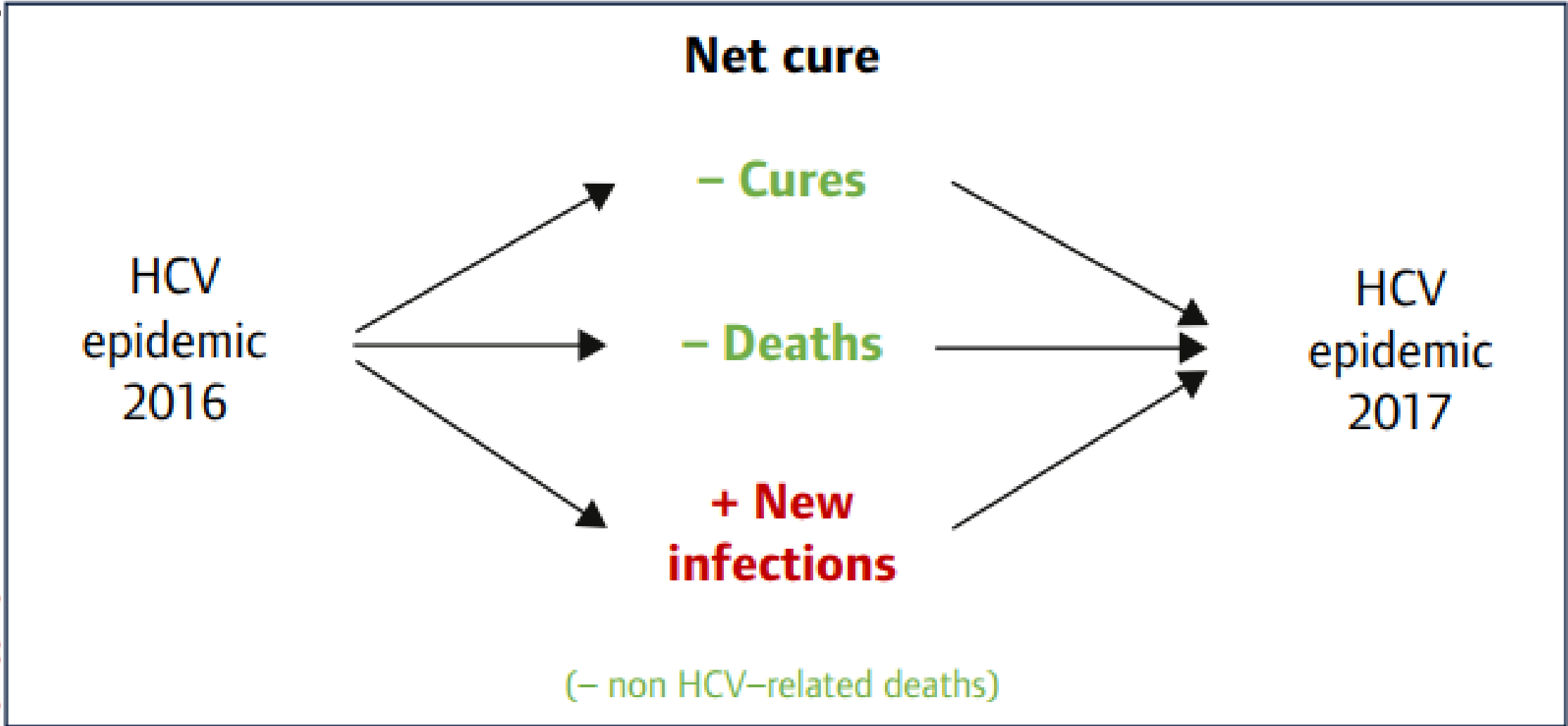
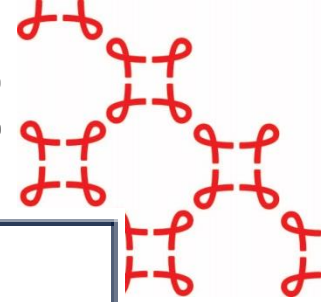


World Health Organization. Global Hepatitis Report, 2017

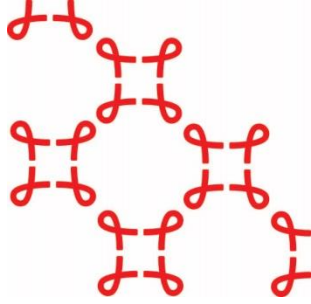




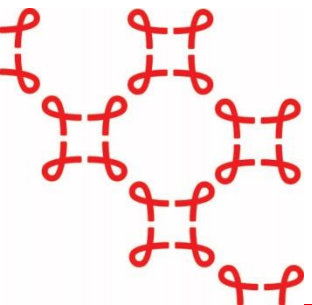
# Calculating the “net cure rate” for hepatitis C



Slide courtesy of Andrew Hill. Hill et al. J Vir Erad, July 2017, 3: 117-123



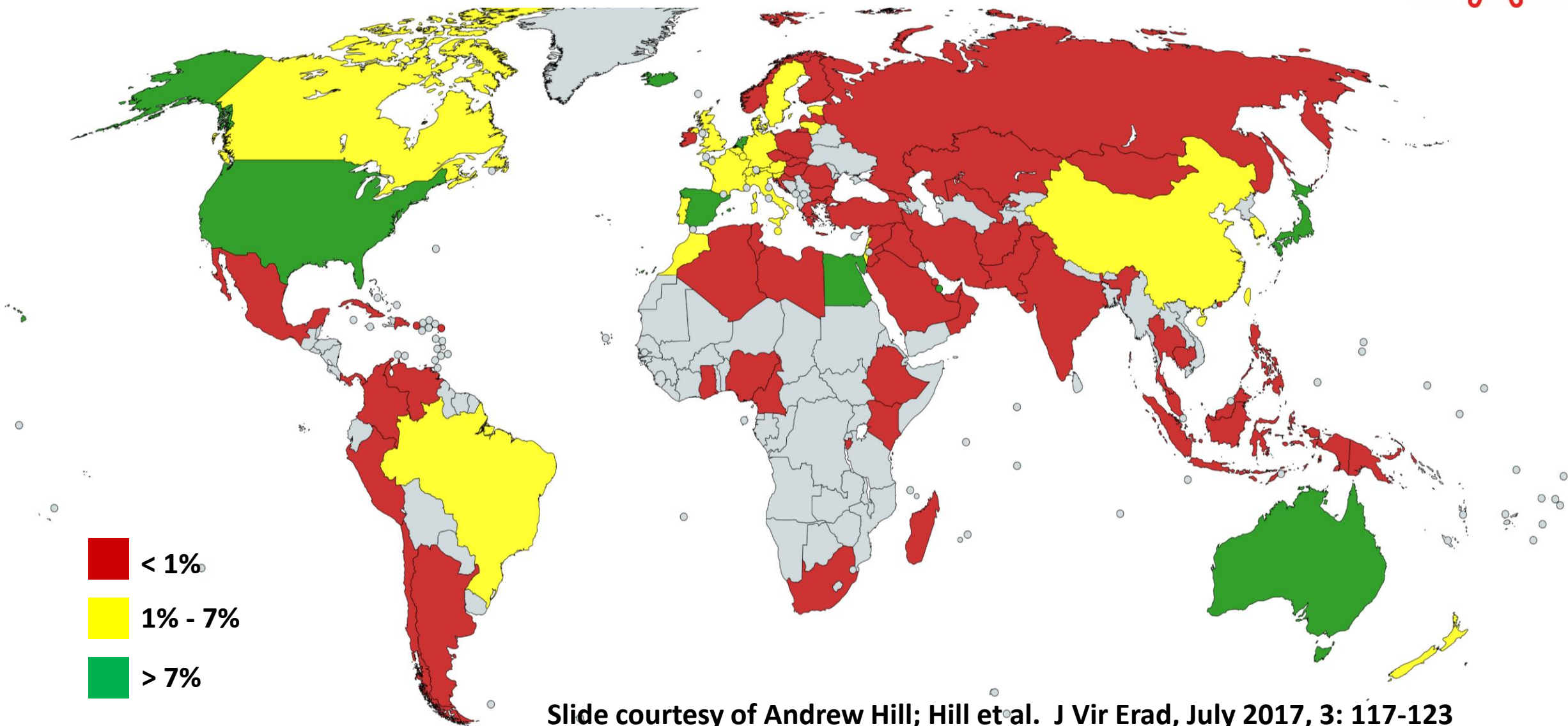
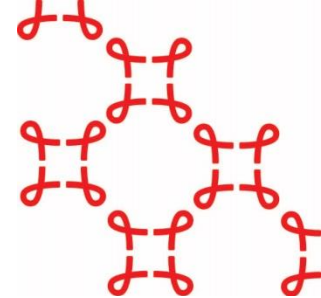
**In 2016, the estimate of net cure worldwide was 0.43%**



Hill et al. *J Vir Erad*, July 2017, 3: 117-123



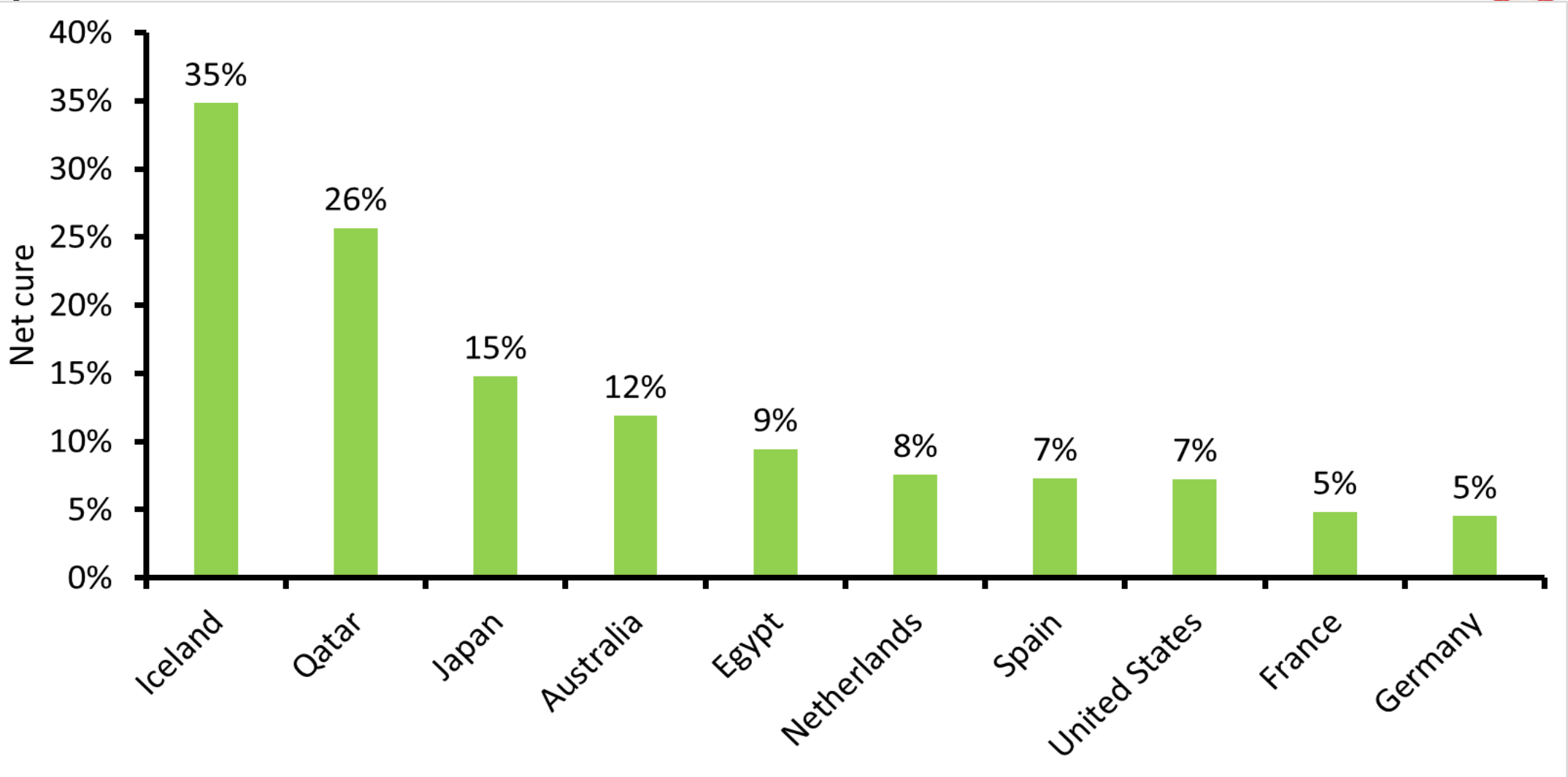
# Hepatitis C: net cure rates in 2016, by country



Slide courtesy of Andrew Hill; Hill et al. J Vir Erad, July 2017, 3: 117-123



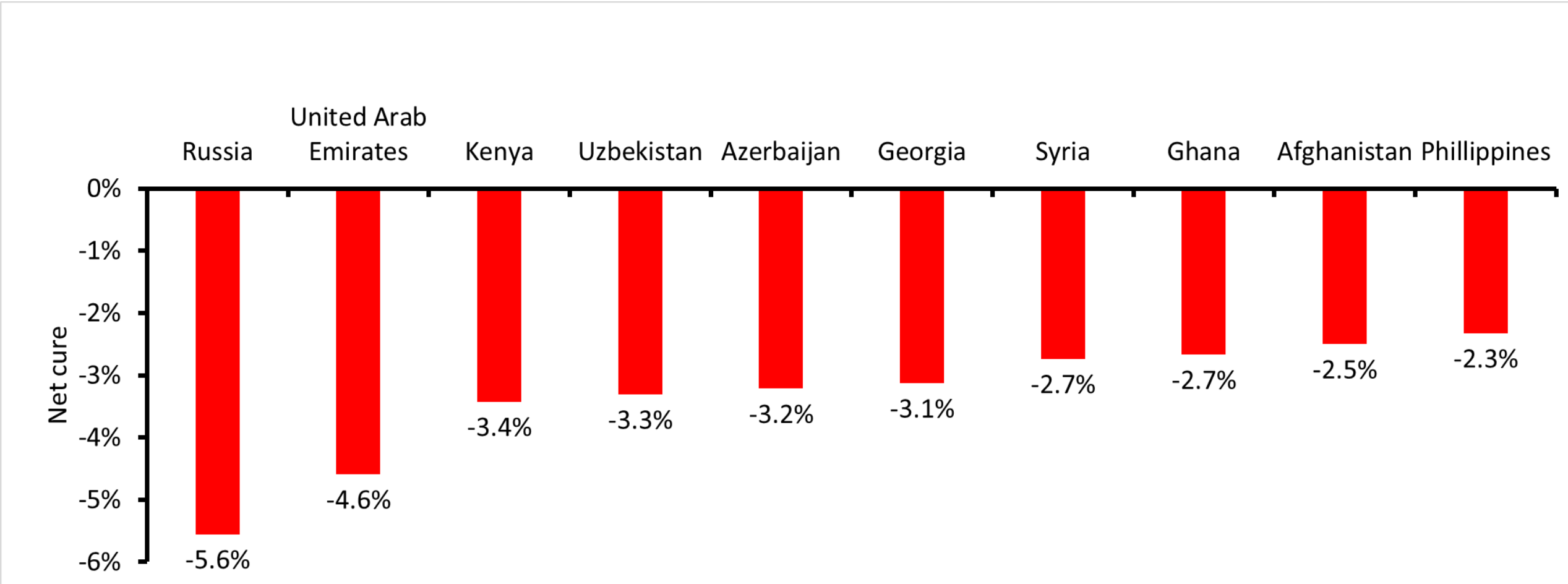
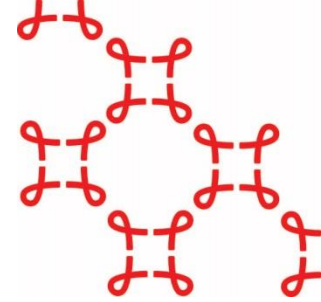
# Top 10 countries by net cure rate in 2016



Slide courtesy of Andrew Hill. Hill et al. J Vir Erad, July 2017, 3: 117-123

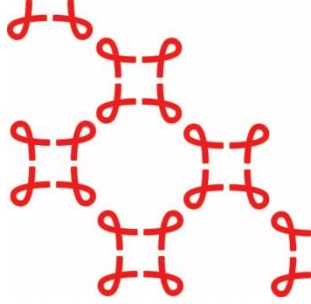


# Bottom 10 countries by net cure rate in 2016



Slide courtesy of Andrew Hill. Hill et al. J Vir Erad, July 2017, 3: 117-123

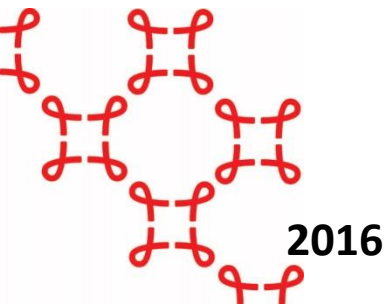




# Access to DAAs in LMICs Voluntary Licenses (VLs)

LMICs may struggle to provide expensive diagnostics – prices for generic DAAs may be too high

LMICs are often excluded from VLs – they face a growing HIV epidemic, a huge HCV burden, higher drug prices and diminishing donor funding (EECA)



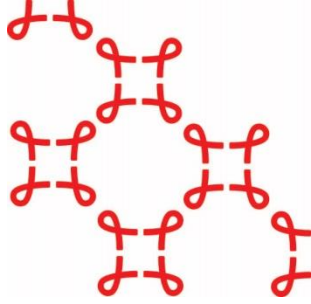
Platt, et al. Lancet Infect Dis



# Compulsory Licenses (CLs)

**Countries have the legal right to issue CLs as per TRIPS**

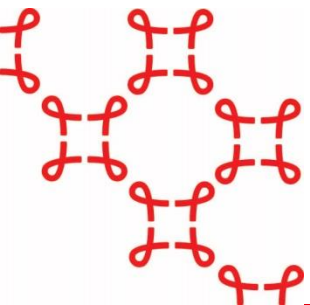
(Trade-Related Aspects of Intellectual Property Rights)



## **Thailand issued CLs for efavirenz and lopinavir/r (2007)**

- LPV/r CL predicted to save US \$24 million per year
- Generic EFV was US \$20/month vs. originator US\$ 43/month; 20,000 more people treated at the same cost

Backlash: withdrawal of regulatory submissions for all Abbott medicines, heat-stable LPV/r withheld; refusal to register any new medicines, USTR put Thailand on priority watch list/ Special 301 report – trading partners with harmful records re: US IP



<http://makemedicinesaffordable.org/en/the-campaign-for-use-of-compulsory-licensing-in-thailand/>



# Access Avenues & Updates

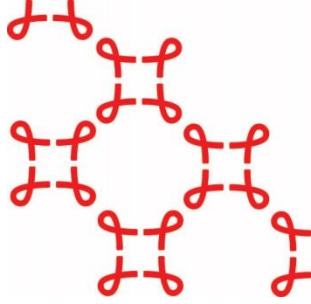
- MIC update
- Patent oppositions
- Buyer's clubs/ personal importation
- Negotiating
- New models for drug development - building in access

Medical tourism?





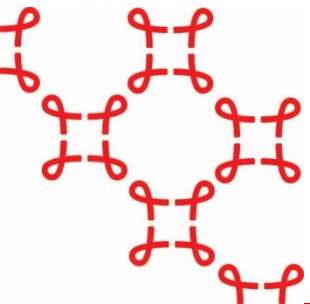
# Missing



The response to HIV evolved with development of, demand for effective treatment

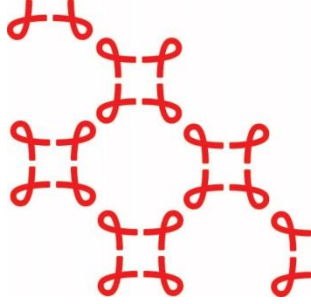
Resources for HIV/HCV, but not for HCV

**Donor coordination: Who will pay, and what will they pay for?**





# Thank you



Dr Andrew Hill and colleagues

Everyone working to increase access to life-saving medicines  
and harm reduction

The panel

