WORLD HEPATITIS DAY 2008
Q & A DOCUMENT

Q: What is World Hepatitis Day?
A: World Hepatitis Day has been launched in response to the concern that chronic viral hepatitis has nowhere near the level of awareness nor the political will to tackle it that is seen in HIV/AIDS, tuberculosis and malaria. This is despite the fact that the numbers chronically infected with, and annually killed by, hepatitis B and C on the same scale.

To mark World Hepatitis Day, Canadians living with hepatitis, their families, patient groups and health care professionals, are joining together to demand that hepatitis B and C receive the attention they deserve as life-threatening diseases affecting up to 600,000 Canadians and almost half a billion people worldwide.

Q: Why is it important to draw attention to hepatitis?
A: In Canada, there is currently no national strategy or comprehensive system for care, treatment and prevention of hepatitis B and C. This is unacceptable for a country that prides itself on its publicly-funded universal health care system.

- Hepatitis B and C prevention requires a commitment of both public and professional education and resources.
- Hepatitis B and C patients need access to the most effective care and treatment options regardless of geographic location or socio-economic status.
- To address the long-term impacts of these diseases requires investment in research and capacity to manage, treat and one day cure current and future hepatitis patients.

Hepatitis is poorly understood and receives inadequate public and financial support. There is also a stigma around the disease that needs to be erased – it can affect anyone from any walk of life. It is a silent killer that can go unrecognized for years.

Canadians need to know how to protect themselves and what their risk factors are because hepatitis B and C can show no symptoms for many years, until it is potentially too late to treat. This is why it is so important for people to learn about the risk factors and talk to their doctor about getting tested.

Q: Who developed the 12 Government “Asks”?
A: Six of these “asks” were developed by the World Hepatitis Alliance. The other six “asks” were developed by the Canadian World Hepatitis Alliance and were developed to address issues specific to Canada.

Q: What are the six global “Asks”? 
A: The six global “Asks” formulated by the World Hepatitis Alliance are:
• Public recognition of chronic viral hepatitis as an urgent public health issue
• The appointment of an individual to lead Government strategy nationally
• The development of a patient pathway for screening, diagnosis, referral and treatment
• Clear, quantifiable targets for reducing incidence and prevalence
• Clear, quantifiable targets for reducing mortality
• Clear, quantifiable targets for screening

Q: What are the six Canadian “Asks”?
A: To reduce the health and social impact of hepatitis B and C on the liver health of Canadians, we ask federal, provincial and territorial governments to adopt a fully-funded, coordinated national strategy that by 2012:
• Promotes prevention of both hepatitis B and C through expanded education, immunization and harm reduction programs all across Canada.
• Improves access to comprehensive care and treatment programs in all areas of the country.
• Increases knowledge and innovation through interdisciplinary research and surveillance to reduce the burden of both hepatitis B and C on Canadians.
• Creates awareness about risk factors, stigma and the need for testing among the general population and at-risk groups.
• Builds capacity through training and recruitment of qualified health professionals.
• Supports communities and community-based groups in developing, delivering and evaluating peer-driven and focused initiatives.

Q. What is the Canadian World Hepatitis Alliance’s response to the Minister’s announcement on May 14 renewing their funding for hepatitis C prevention, support and research?
A. We appreciate that the government’s recent announcements provide some recognition of hepatitis C as a national health issue, however, this is only the tip of the iceberg. Hepatitis B has been completely ignored and the hepatitis C funding is woefully inadequate to address the full scope of the issue.

Canadians are dying because of inaction and ignorance. The Canadian government needs to recognize these two liver diseases as life threatening and demonstrate their commitment to prevention, treatment, support and research with funding proportionate to the impact and burden of this health issue.
Q: What groups or individuals are involved with the Canadian Steering Committee for World Hepatitis?

A: The Canadian World Hepatitis Alliance is made up of many groups and individuals who feel strongly that hepatitis B and C are being ignored, and Canadians with the diseases are being unfairly treated. Specifically, the groups that comprise the Canadian World Hepatitis Alliance are the Canadian Liver Foundation, Canadian Association for the Study of the Liver, Canadian Association of Hepatology Nurses, Canadian Hemophilia Society, BC Centre for Disease Control, Canadian Association of Hepatology Nurses, Hepatitis C Council of British Columbia, the National Canadian Research Training Program in Hepatitis C, the Canadian Society for International Health, and the Hepatitis C Council of British Columbia.

Q: Why are the “Asks” so important?

A: In Canada, there is no national strategy or comprehensive system for care, treatment and prevention of hepatitis B and C. This is unacceptable for a country that prides itself on its publicly-funded universal health care system.

The “asks” were designed to build awareness among health policy makers of the burden of the hepatitis and encourage them to address this as a public health priority.

Q: What does the “Am I Number 12?” mean?

A: One in 12 people worldwide have hepatitis B or C. While this is far higher than the prevalence of HIV or any cancer, awareness is inexplicably low and the majority of those infected are unaware.

In using “Am I Number 12?” as a theme, we hope to raise awareness of the high prevalence of the disease and minimize the stigma that is often associated with hepatitis by making people recognize that they could be the one in 12. The theme also encourages people to consider their risk level, and to get tested if appropriate.

Q: Who funded this initiative?

A: Canadian World Hepatitis Day activities have been funded by a number of steering committee members as well as members of industry.

Q: What are you trying to accomplish with this initiative?

A: The time for action is now. We are asking the government of Canada to take a leadership role in creating a national strategy that by 2012 will address the issues that are contributing to the suffering and death of so many Canadians.

- We want World Hepatitis Day 2008 to mark a change in hepatitis policy in Canada.
- The Canadian World Hepatitis Day Steering Committee, comprised of individuals, healthcare professionals and associations from across the country, have created a list of 6 asks to government for 2012 with the goal of reducing the health and social impact of hepatitis B and C on Canadians.
Hepatitis B and C are diseases that touch all Canadians, yet people are dying because of inaction and ignorance. We hope to raise overall awareness and encourage the federal governments to adopt a national strategy that recognizes the unique nature of hepatitis B and C for Canadians.

Q: What are the potential implications to the healthcare system if issues with hepatitis are not addressed?

A: Clearly, if hepatitis B and C are not addressed by a coordinated and concerted national strategy by 2012, the disease will be a major burden on the healthcare system in the next 20 years as today’s patients will develop serious complications, liver cancer or require liver transplants. The already tremendous burden on our healthcare system will continue to increase dramatically.

Q: What can the government do to decrease the growing burden of hepatitis in Canada?

A: In Canada, there is no national strategy or comprehensive system for care, treatment and prevention of hepatitis B and C. This is unacceptable for a country that prides itself on its publicly-funded universal health care system.

• Hepatitis B and C prevention requires a commitment of both public and professional education and resources.

• Hepatitis B and C patients need access to the most effective care and treatment options regardless of geographic location or socio-economic status.

• To address the long-term impacts of these diseases requires investment in research and capacity to manage, treat and one day cure current and future hepatitis patients.

Q: Are there enough appropriately trained healthcare workers in Canada to deal with the growing impact of hepatitis?

A: No. Capacity is one of the big issues in dealing with this disease, and is one of the six Canadian “Asks” to government. We are asking the Canadian government for a national strategy that includes building capacity through training and recruitment of qualified health professionals. We need new infrastructures that focus on the education and development of healthcare professionals. We also need governments to develop strategies to increase the number of practising hepatologists and hepatology nurses in Canada.

Q: What are hepatitis B & C?

A: Hepatitis means inflammation of the liver. Hepatitis B and C are viruses that attack the liver and can lead to cirrhosis, transplantation, cancer and death. These potentially threatening diseases, can be treated in many people so early diagnosis is critical.
Q: **What is the difference between hepatitis B & C?**

A: Hepatitis C is spread by direct contact with the blood of an infected person. Hepatitis C differs from hepatitis B, which can be spread through blood contact with any body fluid of an infected person.¹

Q: **Why are the other strains of hepatitis not included in this mandate?**

A: Hepatitis B and C are the two of five known hepatitis viruses that can become chronic, causing long-term illness. Together, hepatitis B and C represent one of the biggest threats to global health, killing approximately 1.5 million people a year. It is estimated that more than 500 million people around the world are currently infected with hepatitis B or C and one in three people have been exposed to one or both viruses.²³ The incredible burden of Hepatitis B and C around the world is why World Hepatitis Day is focused on these two forms of the disease.

Q: **How many Canadians have hepatitis?**

A: Approximately 600,000 Canadians are currently living with hepatitis and many don’t even know it.

An estimated 250,000 Canadians -- close to 1% of the population -- are infected with the hepatitis C virus, but only about 20,000 have been treated with drugs that can cure many of them. About one-third are infected and do not even know it, experts say.

Q: **How do you get Hepatitis B and C?**

A: The hepatitis B virus is spread through direct contact with infected blood as well as most major body fluids. The hepatitis C virus is spread through direct contact with infected blood. Many people do not have any symptoms if they contract hepatitis B or C, although they can still transmit the virus to others.

The most common routes of infection are:

- medical or dental interventions in countries where equipment is not adequately sterilized
- mother to infant during childbirth (in the case of hepatitis B)
- blood transfusions and receiving blood products before screening was introduced
- sexual transmission (in the case of hepatitis B)
- sharing equipment for injecting drugs
- sharing straws, notes etc. for snorting cocaine
- sharing razors, toothbrushes or other household articles; and

¹ [http://www.liver.ca/Liver_Disease/Adult_Liver_Diseases/Hepatitis_C.aspx](http://www.liver.ca/Liver_Disease/Adult_Liver_Diseases/Hepatitis_C.aspx)
• tattooing and body piercing if done using unsterile equipment

Q: What should people do if they think they might have been exposed to hepatitis?

A: Most people with hepatitis are unaware they have it and can carry it unknowingly for decades. Only a blood test can detect a hepatitis virus infection. If you think you may have been exposed to the virus or are concerned, you should see your physician and discuss whether or not you should be tested as soon as possible. Hepatitis can be treated in many people but early diagnosis is critical.
Q: **What is the Hepatitis Atlas?**
A: The Hepatitis Atlas is the first truly global, public compendium of statistics and information relating to chronic viral hepatitis B and C. Prior to the development of the Hepatitis Atlas, no up-to-date, central source for these statistics existed. Without up-to-date, comprehensive statistics, it is very difficult to understand the extent of the problem or measure the effectiveness of public health campaigns.

Q: **What does the Hepatitis Atlas show?**
A: The 2008 edition highlights areas of the world where there is currently a lack of publicly available data. Each year the Atlas will be updated to contain information about the incidence, prevalence and mortality associated with hepatitis B and C.

Canada is classified as a country with “good” data available, however the government must be responsible for more effective surveillance of national incidence and prevalence statistics.

The Hepatitis Atlas will evolve over time and we hope that with every year we will be able to provide updated figures and a broader scope of information as more countries share data and play an active role in building the Atlas.

Q: **Isn’t the government doing enough through its funding of Hepatitis C victims of tainted blood?**
A: This funding was very welcome but it is important to keep in mind that this covers only a small percentage of the total number of Canadians living with hepatitis and it does not address the challenges these people face with respect to treatment and care. We are calling on the government for a coordinated, fully-funded national strategy to reduce the health and social impact of hepatitis B and C on the liver health of Canadians.

Q: **How much will such a strategy cost?**
A: This call to action on World Hepatitis Day is the first step in the development of a national strategy. As we engage stakeholder groups and further develop the calls to action we will be able to put dollar figures to initiatives necessary to reduce the health and social impact of hepatitis B and C on the liver health of Canadians.
Q. Isn’t most of what you are asking for a provincial/territorial responsibility?
A. There is no question that all levels of government need to be involved. Much of what we are asking for requires leadership by the federal government. We will be active with the provinces and territories to ensure they are fully engaged as well. There needs to be a sense of urgency and commitment at all levels to reduce the health and social impact of hepatitis B and C.