
IMPROVING UNDERSTANDING OF THE HEPATITIS B CASCADE OF CARE

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INTRODUCTION

- Viral hepatitis presents a significant burden globally
- In Vanuatu, ~8-13% of the population (24,000 - 33,000 people) are estimated to be living with chronic hepatitis B
- Hepatitis B is vaccine preventable but <70% of children in Vanuatu received the hepatitis B birth dose and third dose in 2021
- WHO has targeted elimination of viral hepatitis as a public health threat by 2030 and have set several targets to achieve elimination



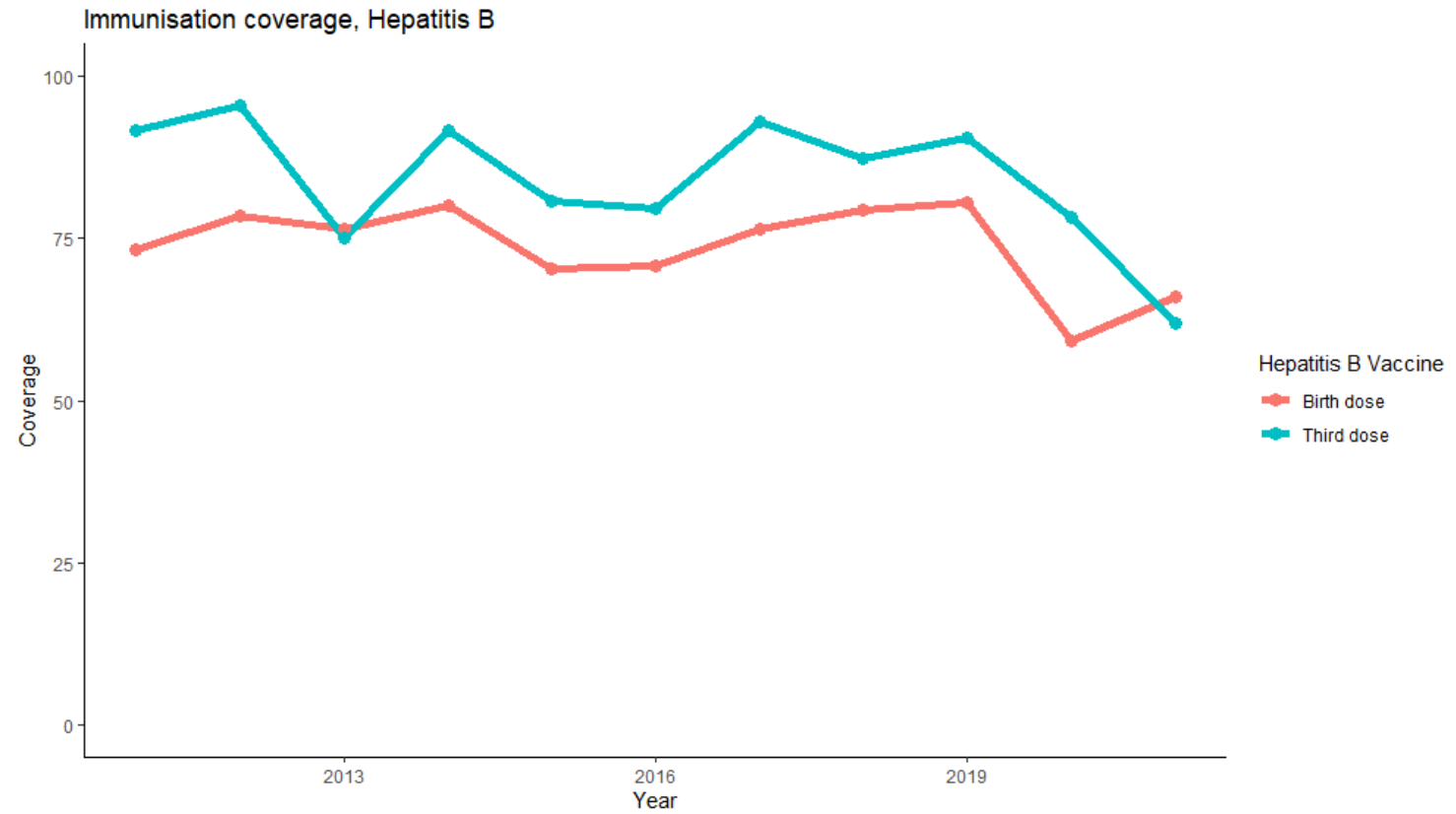
METHODS

- Retrospective data scoping and mapping review
- Existing routine data explored
 - Health Information System (HIS)
 - Immunisation data
 - Relevant Ministry of Health Units
 - Some ANC clinics and laboratories
- Available data for the period 2010-2020 were requested



RESULTS

- Available data includes:
 - vaccination coverage
 - laboratory testing
 - antenatal clinics
 - blood bank screening
 - hospital laboratory data
 - patient data at hospitals, including antiviral treatment data
 - pharmacy data

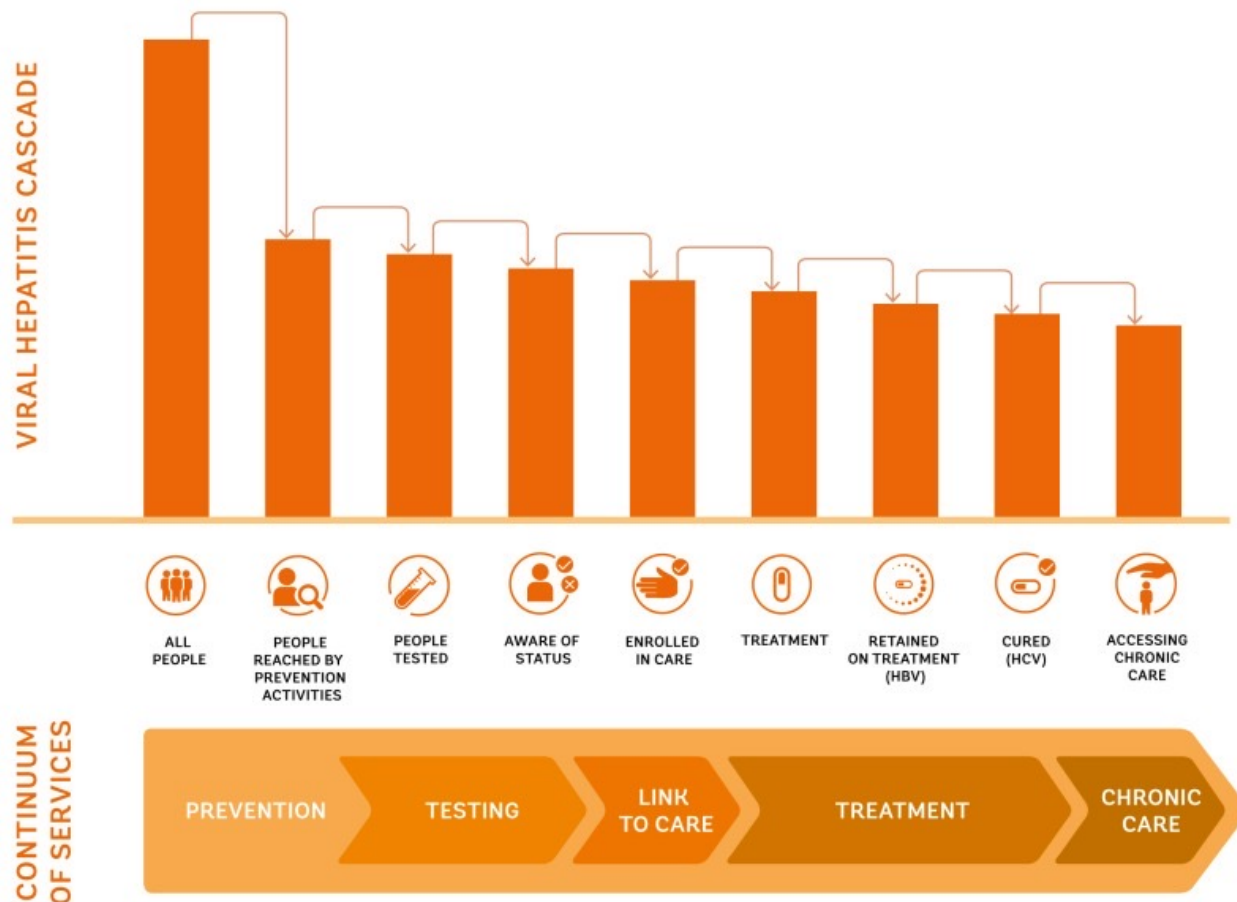


RESULTS

- No data are regularly reported to the hepatitis unit at the Ministry of Health and there is currently no mechanisms for this reporting
- Facility specific data, including testing and treatment, may be available on a facility-by-facility basis
- Estimates are modelled based on old data or limited samples
- Available data show we are not meeting global, regional and national targets



DISCUSSION



- The cascade of care for hepatitis b is not well understood
- There is a need to improve data collection and reporting
- Without this information, it is not possible to understand burden, progress towards targets, and use data to inform programmatic work

RECOMMENDATIONS / IMPLICATIONS

- An annual hepatitis B elimination scorecard is proposed to track progress against national, regional, and global indicators
- Having an annual score card with agreed upon indicators also helps to work backwards to determine what data should be collected at the national level
- Data needed by province, sex, age group, pregnancy status

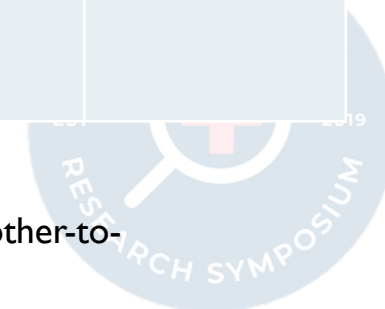


RECOMMENDATIONS / IMPLICATIONS

Year	% HBsAg <5 years	New hep B infections	Hep B deaths	% diagnosed	% treated	% birth dose vaccine	% 3 rd dose vaccine	Maternal testing*
2020 WHO baseline	0.94%	20 per 100 000	10 per 100 000	30%	30%	50%	90%	95%*
2022	~3.0% (2018)	?	?	?	?	66% (2021)	62% (2021)	?
2023								

Targets from: GHSS 2022-2030

* Maternal testing target is for 2030 from Regional framework for the triple elimination of mother-to-child transmission of HIV, hepatitis B and syphilis in Asia and the Pacific, 2018-2030



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- Tankiyu tumas!!
- A similar concept has been used in other settings or for other diseases.
- For example, a hepatitis score care is used in Africa (<https://www.afro.who.int/publications/hepatitis-scorecard-who-africa-region-implementing-hepatitis-elimination-strategy>)

