REGIONAL COMMITTEE FOR AFRICA

Sixty-fourth session
Cotonou, Republic of Benin, 3-7 November 2014

RESOLUTION

VIRAL HEPATITIS: SITUATION ANALYSIS AND PERSPECTIVES
IN THE AFRICAN REGION (Document AFR/RC64/6)

The Regional Committee,

Reaffirming resolution WHA 67.6 that called on Member States to develop and implement national strategies for preventing, diagnosing and treating viral hepatitis based on their local epidemiological contexts;

Recalling resolution WHA 63.18 that recognized viral hepatitis as a global public health problem and called upon WHO to develop a comprehensive global strategy for viral hepatitis prevention and control;

Further recalling resolution WHA 45.17 on immunization and vaccine quality, urging Member States to include hepatitis B vaccines in national immunization programmes, and recognizing that currently the regional hepatitis B vaccine coverage for infants is estimated at 72% which is below the 90% target;

Noting with deep concern that the African Region has the highest prevalence of hepatitis B in the world at 8% and that an estimated 2% of the population are chronically infected with hepatitis C, while major outbreaks of hepatitis A and E continue to occur in Member States;

Recognizing the limited data on viral hepatitis as a result of lack of adequate viral hepatitis surveillance systems;

Acknowledging the need to increase awareness of viral hepatitis among policy-makers and the general population, and considering that most people with chronic hepatitis B or hepatitis C are unaware of their infection and are therefore at serious risk of transmitting the infection and developing cirrhosis or liver cancer;

Expressing concern that preventive measures are not universally implemented and that equitable access to and availability of quality, effective, affordable and safe diagnostics and treatment regimens for both hepatitis B and C are lacking in many Member States of the Region;

Recognizing also the role of health promotion and prevention in the fight against viral hepatitis, and emphasizing the importance of strengthening vaccination strategies as high-impact and cost-effective public health actions;
Concerned that, in the Region, the birth dose coverage rate with hepatitis B vaccine remains unacceptably low and vaccination of health workers against hepatitis B is almost non-existent;

Taking into account the low implementation of standard precautions for infection control, including unsafe injections and the fact that not all the blood units for transfusion are screened for hepatitis B and C;

1. **ADOPTS** Document AFR/RC64/6 entitled Viral hepatitis: situation analysis and perspectives in the African Region;

2. **URGES** Member States:

   (a) to develop and implement coordinated multisectoral national strategies for preventing, diagnosing, and treating viral hepatitis based on local epidemiological context, with involvement of all partners including civil society;
   
   (b) to put in place a strong and well-resourced viral hepatitis surveillance system to support evidence-based policy decision-making;
   
   (c) to raise awareness about viral hepatitis among policy-makers, health workers and the general population especially among those at high risk through health promotion activities in the communities;
   
   (d) to scale up activities for the prevention of viral hepatitis infection including increasing coverage of routine hepatitis B vaccination; introducing the birth dose; vaccinating health workers and at-risk populations; ensuring safe blood transfusion; strengthening infection control in health care settings; increasing access to safe drinking water; improving personal hygiene; ensuring safe food for all populations and safe sex practices and proper disposal of sanitary waste within communities;
   
   (e) to train primary health care workers in the diagnosis, care and treatment of patients with chronic hepatitis B and C;
   
   (f) to increase access to testing, counselling and treatment of chronic hepatitis B and C, and include the WHO prequalified medicines for the treatment of hepatitis B and C on their national essential medicines lists.

3. **REQUESTS** the Regional Director:

   (a) to provide the necessary technical support to enable countries to develop comprehensive and integrated national viral hepatitis strategies, guidelines and monitoring systems;
   
   (b) to work with key stakeholders and facilitate equitable access to quality, effective, affordable and safe hepatitis B and C treatments and diagnostics;
   
   (c) to advocate at global level for a reduction in the prices of medicines for hepatitis B and hepatitis C and to support Member States in negotiating with manufacturers for lower prices using flexibilities contained in the agreement on Trade Related Aspects of Intellectual Property Rights;
   
   (d) to identify and disseminate mechanisms to assist countries in the provision of sustainable funding for prevention, diagnosis and treatment of viral hepatitis;
   
   (e) to report to the Sixty-seventh session of the Regional Committee, or earlier if needed, on the implementation of this resolution.