Meeting Summary

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Come a long way but.....
Take Diversity into Account
Who are the missing millions?

- General population (location, age, etc)
- People who inject drugs
- HIV co-infected
- Prisoners
- Men who have sex with men
- Women
- Trans people
- Indigenous communities
- Refugees
- Sex workers
- Children and Adolescents
HCV treatment in Argentina

Programa nacional de Hepatitis virales. Secretaría de Salud de la Nación
7.2 million people living with HCV in the Americas

88,000 deaths yearly are estimated to be due to HCV in the Americas (2015)

In Latin America and the Caribbean:
- 4 million people living with HCV
- 65,000 new chronic HCV infections each year
(Good) Data is Powerful
Public health and economic impact of hepatitis elimination

The investment case for hepatitis C in Brazil and the Elimination Plan, 2017

Hepatitis C Burden (2016): Total estimated chronically infected: 632,000 in 2016

Two scenarios: Baseline x WHO Elimination Targets:

- Treatment and diagnosis scale up increase **direct costs**, reducing below the base scenario by **2028**
- **Indirect costs will reduce** as a result of earlier and expanded diagnosis and treatment
- After **2028**, the **elimination scenario will cost less than the base scenario** and after 2030 will require less than 0.2% of the total public health budget (US$53 billion in 2017)

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**Fig. 3** – Direct costs in the NSP scenario and the base case scenarios.

**Fig. 4** – Indirect costs in the NSP scenario and the base case scenarios.

**Fig. 6** – Comparing public health budget utilization in the NSP scenario with the base case scenario.
Hepatitis C elimination becomes cost saving by 2030

Between 2018 and 2030, the total cost of elimination is estimated at $51 billion, with minimal ongoing cost beyond 2030.

This compares to $343.2 billion expected expenditure on HIV, Tuberculosis and Malaria over the same time period.
Incidence of primary hepatitis C infection among individuals that tested at PWID clinics and tested hepatitis C antibody negative less than two years ago; ACCESS clinical network, 2012–2018

Incidence of primary hepatitis C infection among HIV-positive GBM that tested at GBM clinics and tested hepatitis C antibody negative less than two years ago; ACCESS clinical network, 2012–2018

Yearly number of cases and incidence for hepatitis C by year of diagnosis in Iceland from 1991 to 2015

TraP HepC started Jan
Price Still Matters
## Price reductions in Indian generic DAAs for private purchase up to June 2019

<table>
<thead>
<tr>
<th>Drug</th>
<th>USD per bottle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sofosbuvir</td>
<td>$330</td>
</tr>
<tr>
<td>Ledipasvir/sofosbuvir</td>
<td>$161</td>
</tr>
<tr>
<td>Daclatasvir</td>
<td>$108</td>
</tr>
<tr>
<td>Velpatasvir/sofosbuvir</td>
<td>$108</td>
</tr>
<tr>
<td></td>
<td>$83</td>
</tr>
<tr>
<td></td>
<td>$60</td>
</tr>
<tr>
<td></td>
<td>$285</td>
</tr>
<tr>
<td></td>
<td>$100</td>
</tr>
</tbody>
</table>

**USD per bottle**

- **Mai.15**
  - Sofosbuvir: $330
  - Ledipasvir/sofosbuvir: $384
  - Daclatasvir: $108
  - Velpatasvir/sofosbuvir: [VALUE]

- **Jun.15**
  - Sofosbuvir: $161
  - Ledipasvir/sofosbuvir: $205
  - Daclatasvir: $108
  - Velpatasvir/sofosbuvir: [VALUE]

- **Jän.16**
  - Sofosbuvir: $108
  - Ledipasvir/sofosbuvir: $205
  - Daclatasvir: $108
  - Velpatasvir/sofosbuvir: [VALUE]

- **Feb.16**
  - Sofosbuvir: $108
  - Ledipasvir/sofosbuvir: $169
  - Daclatasvir: $108
  - Velpatasvir/sofosbuvir: [VALUE]

- **Mai.16**
  - Sofosbuvir: $108
  - Ledipasvir/sofosbuvir: $143
  - Daclatasvir: $83
  - Velpatasvir/sofosbuvir: [VALUE]

- **Aug.16**
  - Sofosbuvir: $92
  - Ledipasvir/sofosbuvir: $83
  - Daclatasvir: $83
  - Velpatasvir/sofosbuvir: [VALUE]

- **Mär.17**
  - Sofosbuvir: $61
  - Ledipasvir/sofosbuvir: $83
  - Daclatasvir: $83
  - Velpatasvir/sofosbuvir: [VALUE]

- **Jun.17**
  - Sofosbuvir: $51
  - Ledipasvir/sofosbuvir: $83
  - Daclatasvir: $83
  - Velpatasvir/sofosbuvir: [VALUE]

- **Jun.18**
  - Sofosbuvir: $38
  - Ledipasvir/sofosbuvir: $83
  - Daclatasvir: $83
  - Velpatasvir/sofosbuvir: [VALUE]

- **Jun.19**
  - Sofosbuvir: $92
  - Ledipasvir/sofosbuvir: $83
  - Daclatasvir: $83
  - Velpatasvir/sofosbuvir: [VALUE]

- **Mai.15**
  - Sofosbuvir: $31
  - Ledipasvir/sofosbuvir: $14
  - Daclatasvir: [VALUE]
  - Velpatasvir/sofosbuvir: [VALUE]

The graph above shows the price reductions in USD per bottle for Sofosbuvir, Ledipasvir/sofosbuvir, Daclatasvir, and Velpatasvir/sofosbuvir from May 2015 to June 2019. The prices are depicted on the y-axis, and the months are listed on the x-axis.
Pricing variations of generic DAAs

- **Sofosbuvir**
  - India: $10
  - Thailand: $91
  - Indonesia: $272
  - Cambodia: $125
  - Vietnam: $247
  - Myanmar: $40
  - Ukraine: $20

- **Ledipasvir/sofosbuvir**
  - India: $19
  - Thailand: $109
  - Indonesia: $136
  - Cambodia: $200
  - Vietnam: $300
  - Myanmar: $95
  - Ukraine: $30

- **Daclatasvir**
  - India: $31
  - Thailand: $4
  - Indonesia: $414
  - Cambodia: $40
  - Vietnam: $330
  - Myanmar: $55
  - Ukraine: $6

- **Velpatasvir**
  - India: $0
  - Thailand: $200
  - Indonesia: $300
  - Cambodia: $95
  - Vietnam: $40
  - Myanmar: $30
  - Ukraine: $6
Disruption & Innovation are Still Needed
New devices, diagnostics, medicines...

That are affordable and quality assured
The impact of civil society

Global progress on the elimination of viral hepatitis as a major public health threat: analysis of WHO Member State responses 2017

In 2017, 135 WHO Member States provided viral hepatitis country profile responses. They are home to 87% of the infected population.

62% had a national viral hepatitis plan.

36% had assigned dedicated funding for implementation.

This varied by whether or not governments engaged with civil society.

<table>
<thead>
<tr>
<th>National plan</th>
<th>National plan and dedicated funding</th>
<th>Observed World Hepatitis Day</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>44%</td>
<td>52%</td>
</tr>
<tr>
<td></td>
<td>23%</td>
<td>85%</td>
</tr>
</tbody>
</table>

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Smith et al., JHEP Reports. August 2019
Implementing Comprehensive HIV and HCV Programmes with People Who Inject Drugs

PRACTICAL GUIDANCE FOR COLLABORATIVE INTERVENTIONS
Thanks
Gracias!

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