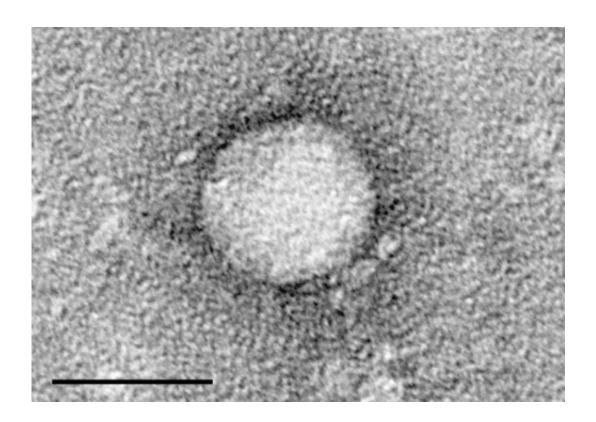


Hepatitis C common among HIV-positive patients in sub-Saharan Africa

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Electron micrographs of hepatitis C virus purified from cell culture. Scale bar is 50 nanometers. Credit: Center for the Study of Hepatitis C, The Rockefeller University.

A new study has found high levels of infection with hepatitis C (HCV) across Africa, particularly in people infected with HIV.

In the largest study of its kind to date, researchers from Imperial College



London and Médecins Sans Frontières/Doctors Without Borders (MSF) collated data on over 1.1 million individuals from 213 studies to provide policymakers with robust estimates of the burden of HCV infection.

The report, published in *The Lancet Infectious Diseases*, found that around three per cent of people in sub-Saharan Africa have been infected with HCV infection, rising to 5.7 per cent in individuals with HIV. The findings will inform the global debate about how <u>treatment</u> should be made available to all those who need it.

Viral hepatitis kills more people each year than HIV, tuberculosis or malaria. An estimated 150 million people worldwide are infected with HCV. Infected people often do not show symptoms until they have suffered severe liver damage, and many go on to develop liver cirrhosis or liver cancer. Over 500,000 people a year die from HCV-related <u>liver disease</u>.

There is no vaccine against the virus, but a new generation of treatments have made possible much quicker and simpler treatment which could be rolled out to regions where access to <u>curative treatment</u> was previously very low. MSF plans to use these new drugs to treat people coinfected with HIV as they are particularly vulnerable to the disease. Dr Krzysztof Herboczek, MSF's HCV Adviser said: "We see many patients in our projects with advanced liver disease as a result of HCV. These treatments are unparalleled but their expensive cost means that many countries cannot afford them. Making effective HCV treatment accessible to everyone who needs it is very important for us."

Dr Graham Cooke from the Department of Medicine at Imperial College London, who led the study, said: "Viral hepatitis is a huge problem in Africa, but currently there's no fund to provide what could be curative treatment. The global scale-up of HIV treatments has left a legacy of systems for both funding and delivering HIV treatment that



could be used to tackle viral hepatitis."

Data from the report was used to inform the recent decision by the Global Fund for HIV, TB and malaria to accept applications from countries wanting to tackle HCV.

"Our study also shows that the challenge spreads far beyond HIV coinfected groups into the general population," said Dr Cooke. The prevalence of hepatitis C in pregnant women was similar to that in the general population, suggesting that HCV testing could "piggyback" antenatal services to improve monitoring and prioritise groups for treatment.

"If we're serious about tackling hepatitis, we need better data on who is affected. It's challenging to test everyone so we need ways to do surveillance simply. One possibility is to test pregnant mothers as a proxy for the adult population, and these results suggest that could be a useful strategy."

More information: V.B. Rao et al. 'Hepatitis C seroprevalence and HIV co-infection in sub-Saharan Africa: a systematic review and meta-analysis.' *The Lancet Infectious Diseases*, Published Online May 6, 2015 www.thelancet.com/journals/lan... (15)00006-7/abstract

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