# HAVE A HEART, SAVE MY LIVER! WHO HAS ACCESS TO THE CURE IN AFRICA?

JOELLE DOUNTIO O.

**HCV COMMUNITY ENGAGEMENT OFFICER** 

**TREATMENT ACTION GROUP** 

CONFERENCE ON LIVER DISEASE IN AFRICA (COLDA)

9-11 September 2021

Thanks: Médecins du Monde (MdM), as some of the data is from mapCrowd, a crowdsourcing platform codeveloped with MdM









- > HCV treatment access barriers in Africa
- Current DAA registration
- > HCV treatment restrictions
- > Recommendations

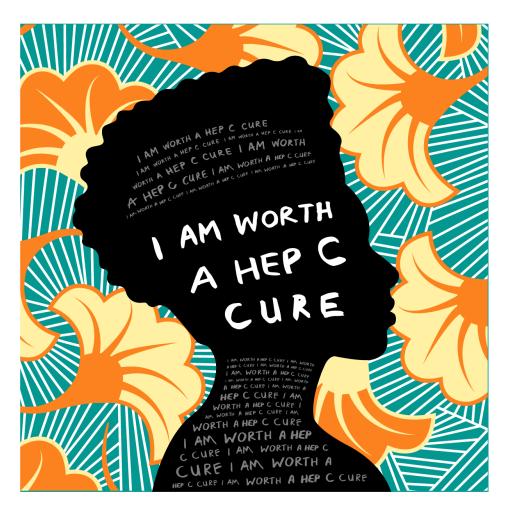




# **KEY TAKEAWAYS**

- Despite voluntary licensing agreements, access to <u>generic pangenotypic</u> DAAs is not happening across African countries
- Delays in registration for DAAs continue to obstruct availability and access
- Treatment restrictions, including sobriety; prescriber; and fibrosis restrictions pose access barriers and should be removed
- Key populations -- people living with HIV or HBV coinfections, people who use and inject drugs, men who have sex with men, incarcerated people, and sex workers -- have highest burden of HCV infections and need to be prioritized in national plans
- #WorthTheCure campaign launched to address remaining treatment barriers







# **HBV & HCV NEW INFECTIONS & MORTALITY BY REGION**

AFRICAN REGION

[47 000-110 000]

[150 000-370 000]

Deaths: 45 000

[23 000-72 000]

[660 000-1 600 000]

New infections: 990 000

New infections: 210 000

Hepatitis B

Deaths: So

Hepatitis C

### GLOBAL

Hepatitis B New Infection: 1 500 000 [1 100 000-2 600 000] Deaths: 820 000 [450 000-950 000]

#### Hepatitis C New Infection: 1 500 000 [1 300 000-1 800 000] Deaths: 290 000 [230 000-580 000]

### REGION OF THE AMERICAS

Hepatitis B New infections: 10 000 [5 100-26 000] Deaths: 15 000 [8 500-23 000]

Hepatitis C New infections: 67 000 [63 000-73 000] Deaths: 31 000 [19 000-84 000]

### EUROPEAN REGION

Hepatitis B New infections: 19 000 [9 400-38 000] Deaths: 43 000 [34 000-51 000]

Hepatitis C New infections: 300 000 [240 000-320 000] Deaths: 64 000 [39 000-72 000]

#### WESTERN PACIFIC REGION

Hepatitis B New infections: 140 000 [96 000-210 000] Deaths: 470 000 [200 000-490 000]

Hepatitis C New infections: 230 000 [220 000-260 000] Deaths: 77 000 [77 000-140 000]

#### WHO REGIONS

- African Region
- Region of the Americas
- South-East Asia Region
- European Region
- Eastern Mediterranean Region
- Western Pacific Region
- Not applicable

### Source: WHO Progress Report on HIV, Viral Hepatitis, and STIs 2021



CONFERENCE ON LIVER DISEASE IN AFRICA

#### EASTERN MEDITERRANEAN REGION

Hepatitis B New infections: 100 000 [79 000-140 000] Deaths: 33 000 [26 000-60 000]

Hepatitis C New infections: 470 000 [240 000-520 000] Deaths: 31 000 [31 000-74 000]

### SOUTH-EAST ASIA REGION

Hepatitis B New infections: 260 000 [180 000-590 000] Deaths: 180 000 [140 000-300 000]

Hepatitis C New infections: 230 000 [200 000-430 000] Deaths: 38 000 [37 000-130 000]



# **TREATMENT ACCESS BARRIERS IN AFRICA**

### Generic DAAs can cost <\$100/12-week treatment course

### Drug registration gap

- Failure of Pharma to provide data to regulatory authorities to aid in registering DAAs
- Limited resources to review regulatory dossiers
- HCV not prioritized & lack of political will to accelerate supply of generic DAAs despite voluntary license agreements
- Resulting in low demand for DAAs, and lack of commercial interest by generic companies

### Treatment rationing & restrictions

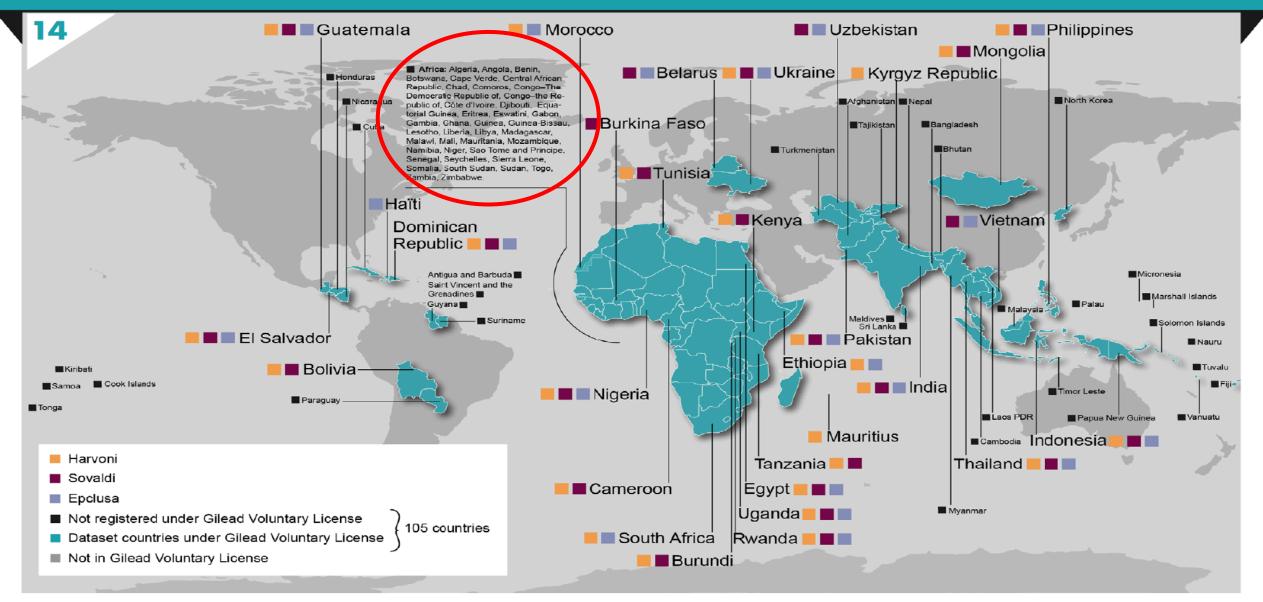
- Based on fibrosis liver disease stage (limiting access to DAAs to people with advance Fibrosis, i.e., F3/F4)
- Sobriety restrictions (requiring people to abstain from drugs/alcohol as a precondition for treatment access)
- Prescriber/specialist restrictions (only hepatologists/infectious diseases specialists etc. can prescribe treatment)

### > Other health systems barriers\*





### **Registration of Branded Sofosbuvir-based DAAs Under Gilead's Voluntary Licenses**

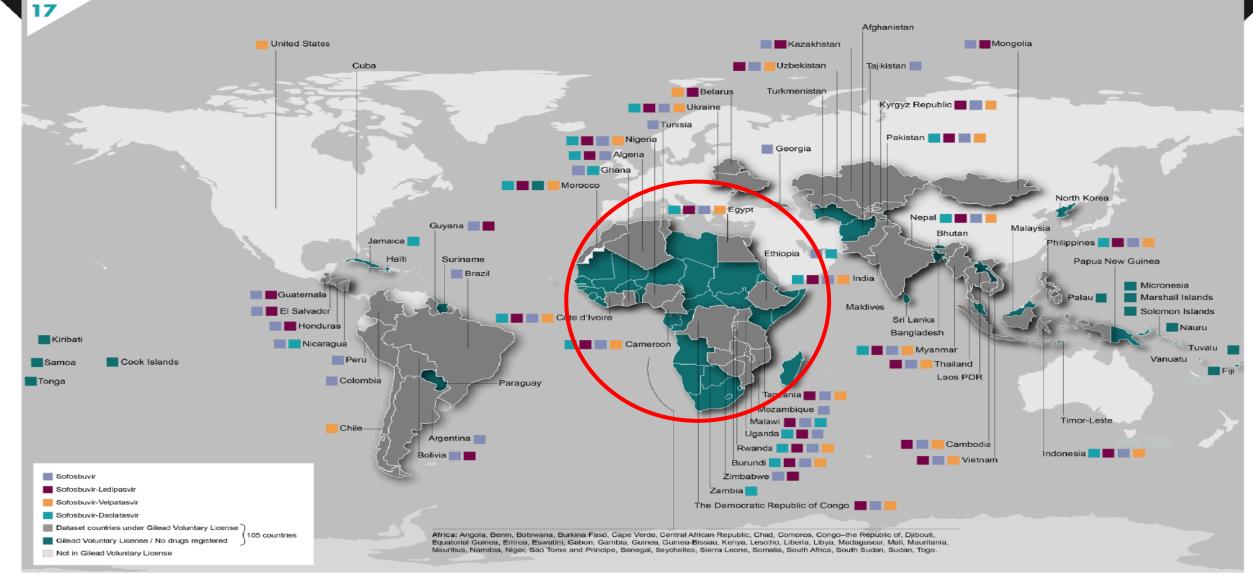


Source: mapCrowd data 2021





**Registration of Generic Sofosbuvir-based DAAs Under Gilead's Voluntary Licenses** 



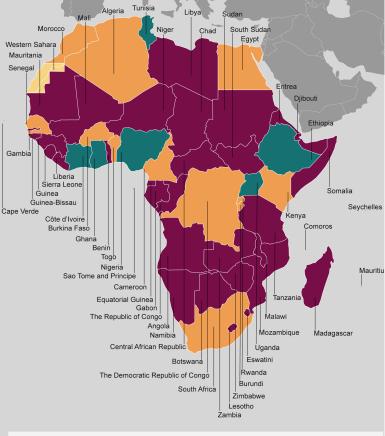
There are 27 countries where generic sofosbuvir-based DAAs are registered out of 105 countries in the Gilead voluntary licenses.

Source: mapCrowd data 2021





## **COMPARISON OF TREATMENT RESTRICTIONS**

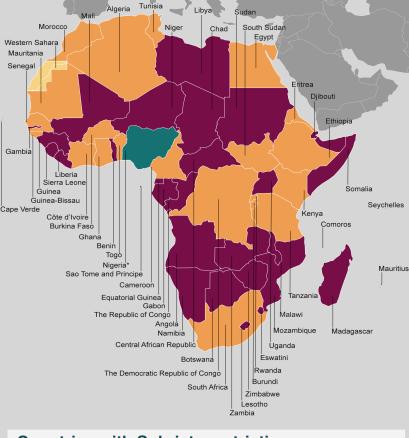


### **Countries with Fibrosis restrictions**

- Countries with Fibrosis restrictions
- Countries with no Fibrosis restrictions
- Countries with no data on Fibrosis restrictions
- No data

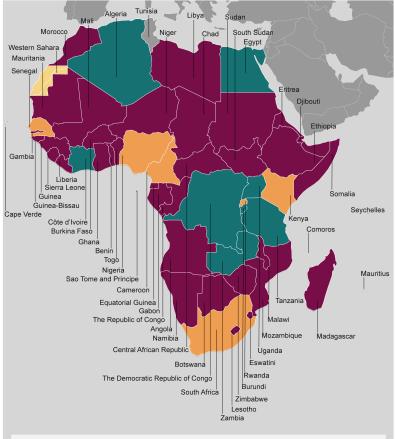
### Source: mapCrowd data 2021





### **Countries with Sobriety restrictions**

- Countries with Sobriety restrictions
- Countries with no Sobriety restrictions
- Countries with no data on Sobriety restrictions
- No data

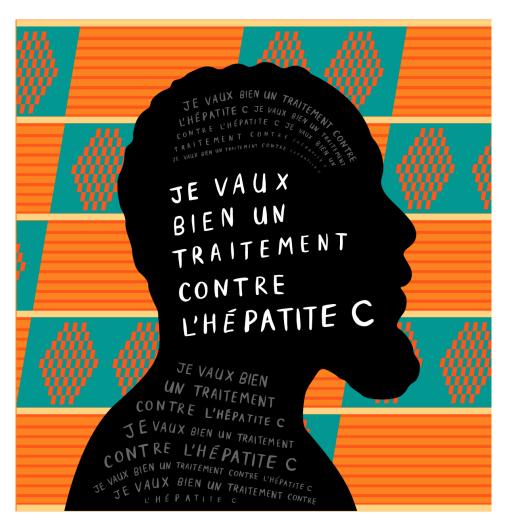


### **Countries with Prescriber restrictions**

- Countries with Prescriber restrictions
- Countries with no Prescriber restrictions
- Countries with no data on Prescriber restrictions
- No data



# RECOMMENDATIONS



- International community & governments: <u>Strengthen an African regional regulatory authority</u> to speed up pending filings
- Governments: <u>Through procurement agencies</u>, <u>pool</u> <u>procurement of DAAs with COVID-19</u>, HIV, TB, and malaria <u>medications</u> relevant to the national epi profiles
- African CDC and all Ministries of Health: review national hepatitis plans to remove all treatment restrictions
- Governments: Make use of all legal <u>TRIPS</u> <u>flexibilities</u>, including compulsory licenses and <u>patent oppositions</u> to complement access to generics
- Governments: Leverage HIV; reproductive/sexual health; and harm reduction infrastructure and funding to Include HCV in the Global Fund & PEPFAR country proposals





# **QUESTIONS OR NEW DATA?**

### **Joelle Dountio**

treatmentactiongroup.org jdountio@treatmentactiongroup.org @TAGTeam\_Tweets @ @treatmentactiongroup

