

For Immediate Release:

Dying of a Curable Disease- hepatitis C (HCV).

Bangkok, 28 July 2010:

In accord with the 63rd World Health Assembly Resolution on viral hepatitis earmarking July 28 as World Hepatitis Day, Regional Organizations working on HIV and AIDS issues across Asia have expressed serious concerns about HCV related deaths amongst People Living with HIV (PLHIV) and people who use drugs (PUD).

Approximately 200 Million (about 3%) of the World's population are infected with hepatitis C (HCV) and each year another 3 to 4 million people are newly infected. The World Health Organization reports that People Who Inject Drugs (PWID) are most at risk of HCV infection with the prevalence of HCV in this group being 92% in India, upto 98% in Indonesia, 90% in Thailand and 89% in Pakistan. A large proportion are also co-infected with HIV.

Awareness about HCV including prevention, diagnosis and treatment is alarmingly low among PLHIV and PUD as well as health professionals treating HIV. Few governments adequately recognize or address hepatitis C in their HIV or public health programs contributing to these low levels of HCV education and awareness.

Although hepatitis C is a curable disease, the medications are prohibitively expensive and out of the reach of the majority of those infected resulting in poorer quality of life and in many cases, death from complications of liver disease, particularly during HIV treatment – all avoidable through HCV treatment and appropriate management of HCV HIV co infection. The Patents being held by two pharmaceutical companies severely limit access to treatment for those who most need it.

Rico Gustav, APN+ Treatment Officer and Regional Coordinator of ITPC Southeast Asia said *“Many of us are living with HIV and HCV co-infection. The ARV we take for HIV will not make sense and be of benefit if our HCV is left untreated. So investment to increase people on ARV for HIV will not have the desired results if HCV is left unaddressed”*.

“Though there has been recent positive developments with the WHA resolution on viral hepatitis, the WHO, UNODC and UNAIDS Technical Guide for Universal Access, people who use drugs who are most affected by HCV still need to put pressure and demand for access to diagnostics and treatment. This is compounded by the criminalization policies of governments in Asia, which inhibits and denies access to essential Harm Reduction services”, said Dean Lewis, Regional Coordinator, Asian Network of People who Use Drugs, (ANPUD).

The Regional Organizations call on policy makers, governments and the donor community to recognize the urgency of the issue. It is however clear that if HCV is left unattended and issues around prevention, testing, affordability and accessibility of treatment are not addressed, the global investment on HIV programs will not have the desired results and outcomes for those living with HIV and HCV co-infection. In fact, not addressing HCV will result in poorer health for people living with HCV and a greater burden to health systems.

Above all, what is the point of the investment when people continue to live with HIV, so far an incurable disease, but ultimately die of a curable disease – hepatitis C?

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