

AFRICAN VIRAL HEPATITIS CONVENTION 16–18 MAY 2024



Advocating for the awareness and elimination of viral hepatitis in Africa hosted by GHASSA under the auspices of the Gastroenterology Foundation of SSA in conjunction with the IHPBA meeting 15–18 May 2024, Cape Town, South Africa.

Viral hepatitis and liver cancer represent a major public health burden in Africa. It is important that Africa, which has one of the greatest burdens of liver disease, responds to the 2016 World Health Organization call, for the elimination of viral hepatitis as a public health threat, by 2030. This cannot be achieved without further capacity and infrastructure development on our continent. An African Viral Hepatitis Convention focusing solely on this public health threat, will be hosted by GHASSA (The Gastroenterology and Hepatology Association of SSA) in conjunction with the IHPBA meeting in Cape Town in 2024. The convention will provide an opportunity for the formation of national and international networks of hepatologists, gastroenterologists, infectious disease specialists and other clinicians, virologists, public health professionals, community health organisations, activists, as well as policy makers and Industry to strive towards the elimination of viral hepatitis and liver cancer in Africa. Hepatitis B viral infection (HBV) rates in Africa largely reflect a failure of maternal and child healthcare programmes to prevent HBV mother-child transmission and early childhood acquisition. HBV is entirely vaccine preventable and only 25% of sub-Saharan African (SSA) countries (12 of 47) have implemented hepatitis B birth dose vaccination. This warrants urgent and immediate legislation. Access to curative direct-acting antiviral agents for chronic hepatitis C remains limited in many SSA countries and we need to learn from the highly successful HCV elimination programmes in Egypt and Rwanda. It is important that we urgently raise awareness of the extent of liver disease in Africa, both nationally and internationally. We need to learn from the lessons learnt in addressing HIV/AIDS, malaria and tuberculosis and other communicable diseases, using the capacity and infrastructure developed over the years, in order to increase the profile and management of viral hepatitis and liver disease in Africa. Advocacy in viral hepatitis is gaining momentum globally and the successful patient advocacy

programmes in Africa need to be expanded across all regions of Africa to raise the awareness of the importance of preventing hepatitis B mother-child transmission and to give individuals infected with viral hepatitis a voice to demand care. Advocacy groups play a critical role in overcoming the barriers of stigma associated with viral hepatitis and influencing policy-makers, National Departments of Health, and Industry on their obligatory role in providing affordable and accessible diagnostics and therapeutics. What viral hepatitis in Africa requires is a “Nkosi moment”. Nkosi Johnson, a young fellow, who in 2000, at the first AIDS Conference held in Africa in Durban, South Africa captured the audience and world’s attention to the plight of those living and dying from HIV/AIDS in Africa. This became a landmark and seismic shift in the acceptance that access to HIV care was required for all and catapulted the issue of HIV/AIDS in SSA onto the global stage. Viral hepatitis in Africa too needs a seismic shift and more specifically a place on the global health funding arena.

**Chris Kassianides, Mark Sonderup & Wendy Spearman
(Convention Chairs)**



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Full report available on www.gastrofoundation.co.za