Hepatitis C elimination program in Georgia

Background

Georgia, a country in the Caucasus region of Eurasia, considering serosurvey data (performed with technical support of US CDC) has a high prevalence of hepatitis C virus (HCV) infection.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>n</th>
<th>%</th>
<th>Estimated # nationwide ≥18 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anti-HCV+</td>
<td>425</td>
<td>7.7%</td>
<td>208,800</td>
</tr>
<tr>
<td>HCV RNA+</td>
<td>311</td>
<td>5.4%</td>
<td>150,300</td>
</tr>
</tbody>
</table>

In April 2015, Georgia government announced HCV as a priority and committed to eliminate the disease by 2020 and launched the unprecedented Hepatitis C Elimination Program, initially focused on treating HCV-infected persons with severe liver disease using curative regimens based on new direct-acting antivirals (DAAs). Starting in June, 2016, inclusion criteria were removed, expanding enrollment eligibility to include patients regardless of disease stage.

Why Georgia?

Features that made Georgia an ideal setting for eliminating HCV:
- High prevalence
- Small population
- Political will
- Diagnostic and human capacity
- Close partnership with US CDC and other organizations

Substantial progress has been made to eliminate HCV infection in Georgia, and the country has demonstrated the ability to rapidly scale up of care and treatment services. To achieve elimination, there still some challenges remain, including increasing access to care and treatment services and implementing a comprehensive approach to prevention and control of HCV infection. Georgia’s HCV elimination program could provide lessons for future programs to control HCV infection worldwide, particularly as treatment becomes more affordable and more countries seek to provide care and treatment services.

History and Overview of the HCV Elimination Program 2014-2016

2015 (April)
Approval of HCV elimination action plan and Launch of state program

2015 (July)
1st National Workshop on Hepatitis C and Establishment of National Committee for HCV Treatment with “Sofosbuvir” based regimens

2015 (Nov)
1st TAG

2015 (May)
Grant for development of new electronic program

2016 (April)
First stock of Ledipasvir/Sofosbuvir

2016 (June)
New “Elimination C” program was launched
Eligibility criteria were removed

2016 (April)
Side session for Georgia at “EASL”
Long term agreement between Company Gilead Sciences, Inc.

2016 (October)
2nd TAG
Establishment of Georgia HCV Elimination Scientific Committee

Care cascade April 2015-December 2016

- HCV antibody positive
- Initiated a diagnostic evaluation
- Chronic HCV
- Began the treatment
- Completed treatment

Of those who completed treatment and were assessed for sustained virologic response (SVR), 79.5% in sofosbuvir-based regimen group and 98.2% in sofosbuvir/ledipasvir treatment group attained SVR

References

1. Ministry of Labour, Health and Social Affairs of Georgia
2. National Center for Disease Control and Public Health of Georgia
3. Infection Diseases, AIDS, and Clinical Immunology Research Center, Tbilisi, Georgia
4. CDC Foundation
5. Global Disease Detection, Division of Global Health Protection, South Caucasus CDC Office, Tbilisi, Georgia
6. Division of Viral Hepatitis, National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention, Centers for Disease Control and Prevention, Atlanta, Georgia, USA
7. Clinic “Neolab”, Tbilisi, Georgia
8. Clinic “Hepa”, Tbilisi, Georgia
9. “Medical Center Mrchveili”, Tbilisi, Georgia

Conflicts of Interests

No conflicts of interest to report.