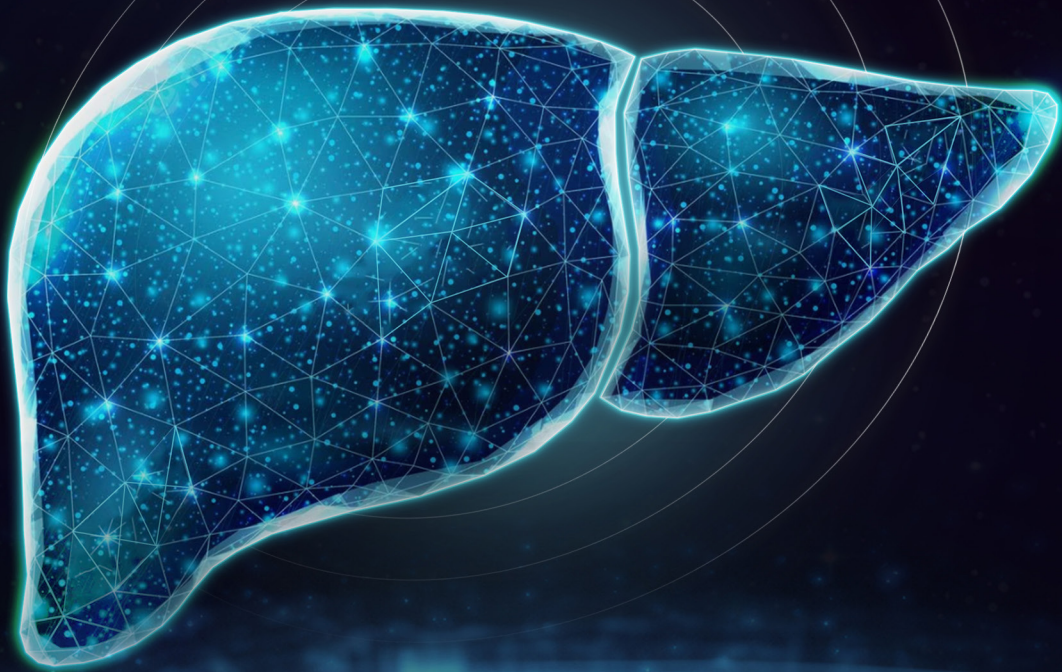


ELIMINATING ASIA'S SILENT EMERGENCY:

HEPATITIS AND HEPATOCELLULAR CARCINOMA



About the APAC Liver Disease Alliance

The Alliance was launched in January 2023 and consists of founding members including diagnostics companies such as Abbott and Roche, as well as academia, NGOs, liver coalitions, patient groups, and experts. The APAC Liver Disease Alliance is the first platform in the Asia-Pacific region dedicated to addressing a wide range of liver diseases, including cirrhosis, hepatocellular carcinoma, and viral hepatitis. Its primary goals are to promote prevention, early detection, timely referral, and research in the field of liver diseases. This Alliance serves as a neutral platform for public-private dialogues, emphasizing the importance of effective liver disease prevention, control, and management while advocating for optimal policies that benefit both health systems and society as a whole.

To find out more about or get involved with the APAC Liver Disease Alliance, please visit <https://apacliverdiseasealliance.org/>.

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01 Foreword



Ms Capucine Pénicaud

Director, Program and Partnership, The Hepatitis Fund

The release of the first APAC Liver Disease Alliance White Paper is timely. It addresses the clear need for better linkage between hepatitis care and cancer care in the APAC region, where liver diseases contribute to significant mortality, economic losses, and grief in communities from this region. Hepatitis deaths in Asia-Pacific account for more than half of the global death toll and hepatitis is the leading cause of liver cancer.

This Paper highlights the gaps in HBV and HCV policy, funding, and screening. Importantly, it provides a strong, practical five-point plan to address gaps in the hepatitis and liver cancer landscapes across APAC. At the Hepatitis Fund, we firmly believe that hepatitis care is cancer prevention, and we are pleased that the Alliance is actively working to fill that gap and working towards integration, both upstream towards public health approaches to infectious diseases and downstream towards cancer screening and care.

We are confident that this White Paper will pave the way for more significant collaborations and partnerships that can make a real difference in the lives of those affected by liver diseases.



Dr John Ward

Director, Coalition for Global Hepatitis Elimination

In an era characterized by advances in medical science and public health, an unyielding health crisis remains: viral hepatitis and its complications such as hepatocellular carcinoma. These present a significant socio-economic burden in the APAC region, where hepatitis deaths have accounted for 63% of the global death toll.

In response to this pressing issue, the APAC Liver Disease Alliance has released its first White Paper for hepatitis and HCC. Central to this White Paper is a pragmatic five-point action plan that represents a blueprint to encourage funding allocation and guide the implementation of national hepatitis action plans and national HCC surveillance programs, tailored to the Asia Pacific context.

As a diverse alliance focused on Asia Pacific, the APAC Liver Disease Alliance is uniquely positioned to support the outlined policy recommendations, and its work will play a pivotal role in implementing strategies that enable more robust linkages between public health approaches to infectious diseases and downstream HCC surveillance and care.

We at the Coalition for Global Hepatitis Elimination are committed to working together to expand access to HBV and HCV services and improve early detection of HCC. It is our sincere hope that this White Paper serves not just as a guiding document, but as an ignitor of further collaborations and partnerships to accelerate progress towards HBV and HCV elimination in APAC.

02 Executive Summary

Liver diseases, which can be caused by viral infections, inherited conditions, obesity and alcohol misuse, have a significant impact on public health in the Asia-Pacific (APAC) region, where 63% of global deaths from liver diseases occur. Without systemic action, this public health emergency threatens to worsen. This paper focuses specifically on hepatitis and liver cancer, also known interchangeably as HCC (hepatocellular carcinoma) given that it is the most common type of liver cancer. While non-alcoholic steatohepatitis (NASH) and non-alcoholic fatty liver disease (NAFLD) contribute to HCC development, viral hepatitis, particularly HBV and HCV, remains the primary cause of HCC in APAC.

The aim of this white paper is to assess the current landscape of liver diseases in APAC, investigate gaps and provide evidence-based recommendations to reduce the clinical, economic, societal, and humanistic burden of hepatitis and HCC and improve public health in the APAC region.

ECONOMIC AND CLINICAL BURDEN OF HEPATITIS AND HCC



**3 times
higher**

hepatitis death
rate compared to
HIV/AIDS



AUD 26 billion

in lost productivity
due to HCV-related
absenteeism,
presenteeism, and
premature deaths



610,000

new cases of liver
cancer in APAC
in 2020



72%

of total HCC deaths
worldwide were
attributed to APAC
alone



USD 11.1 billion

estimated
economic burden
caused by HCC
in 2019, equivalent to
0.047% of the local GDP

The current landscape for liver diseases was assessed through a targeted literature review of international and national sources, including journal publications and expert roundtable outputs. Efforts towards eliminating hepatitis need to be intensified as most APAC territories are not on track to eliminate hepatitis and reduce the burden of liver cancer by 2030, despite the World Health Organization (WHO) Global Health Sector Strategy (GHSS) on viral hepatitis setting out this target for elimination of viral hepatitis.

2.1 CRITICAL SUCCESS FACTORS FOR HEPATITIS ELIMINATION

The presence of a national plan, sufficient political will and coordination, adequate funding, and well-established screening and treatment integrated within existing health systems and tailored to the needs of different populations in different settings are key to hepatitis elimination. The challenges and recommendations were raised, developed and refined through the collaborative efforts of leading hepatitis and HCC experts, including a Liver Alliance Charter workshop ([the Alliance Charter can be accessed here](#)) and a roundtable discussion organised by the alliance in Feb 2023.

2.2 CRITICAL SUCCESS FACTORS FOR COMPREHENSIVE HCC MANAGEMENT

We base the critical factors for effective HCC surveillance and management on Japan's gold standard surveillance model and opinions of other regional key opinion leaders in HCC. The factors identified include the presence of a national HCC surveillance program, sufficient political will and coordination, adequate funding, extensive surveillance protocols, public education, careful and accurate treatment selection, and high-quality treatment techniques. Adequate funding is crucial for the successful implementation of comprehensive HCC surveillance programs utilizing ultrasound and tumour markers.

2.3 THE INVESTMENT CASE FOR HEPATITIS AND HCC

We also present the investment case for increasing investment in hepatitis elimination and comprehensive HCC management in the region. A comprehensive HBV elimination program consisting of diagnosis, linkage to care, and treatment is cost-effective and saves health system resources. Screening for HCV can lead to significant cost savings, and combining screening with treatment will lead to a high return on investment. Biannual ultrasound and AFP (Alpha Fetoprotein) tumour marker test are the most cost-effective surveillance methods for patients with cirrhosis and chronic HBV.

HEPATITIS ELIMINATION AND HCC SURVEILLANCE IS COST SAVING



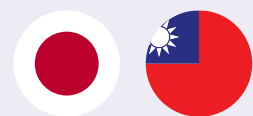
USD 2.23 **USD 1.70**

By 2035, every USD 1 spent on HBV elimination in Philippines and Vietnam will return USD 2.23 and USD 1.70 respectively



USD 9.1 billion

net economic benefit in Pakistan by 2050 if USD1.45 billion is invested in HCV elimination



≈ -33% **≈ +15%**

Cost of illness (COI) trended downwards in Japan with the presence of a national surveillance program while COI trended upwards in Taiwan between 2002 and 2014

2.4 POLICY RECOMMENDATIONS FOR HEPATITIS AND HCC

Based on the evidence of the health and economic benefits associated with tackling liver diseases, there is a clear need for APAC governments and all stakeholders to take decisive action. We propose five key actions that are needed to reduce the burden of Hepatitis and HCC in the APAC region:

HEPATITIS NATIONAL ACTION PLANS NEED TO BE MORE COMPREHENSIVE

1.

- **Set clear elimination goals** and targets and actively track progress.
- **Leverage resources** to support budget-based planning and implement localized strategies.
- **National actions plans need to be costed and funded** under local budgets or utilize catalytic funding to kick-start
- **Set up a national steering committee** to track progress of elimination in line with targets set

EXPAND HEPATITIS SCREENING AND TREATMENT, INTEGRATED WITHIN EXISTING HEALTH SYSTEMS AND TAILORED TO THE NEEDS OF AFFECTED POPULATIONS IN VARIOUS SETTINGS

2.

- **Adopt the recommended stepwise approach** (4-steps) to develop a national hepatitis screening strategy.
- **Integrate hepatitis initiatives** into existing health systems, broader health initiatives and infrastructure to improve linkage to care.

GOVERNMENTS CAN SECURE GREATER FUNDING BY INTEGRATING HEPATITIS AND HCC INTO BROADER HEALTH INITIATIVES AND EMPLOYING BLENDED FINANCING MODELS

3.

- **Frame funding** as part of the universal health coverage to advocate for domestic resources.
- **Leverage catalytic funding from global funding bodies** to kickstart programmes by implementing micro elimination strategies

IMPLEMENT A COMPREHENSIVE NATIONAL HCC SURVEILLANCE PROGRAM AND ENSURE TIMELY ACCESS TO TREATMENT FOR HCC AND HEPATITIS

4.

- **Learn from the gold standard:** a sustainably financed and thoughtfully implemented HCC surveillance program like Japan's.
- **Amplify surveillance efforts** among high-risk populations to accelerate access to care.

INCREASE AWARENESS AND IDENTIFY POLICY CHAMPIONS TO DRIVE POLITICAL COMMITMENT

5.

- **Launch public awareness activities** to promote health equity and combat stigma.
- **Secure buy-in and mobilize support** from policy champions and seize policy windows to generate momentum for action.

In conclusion, there is an urgent need to address liver diseases in APAC, which are causing the death of approximately 1.5 million people every year in the region. Every stakeholder in the ecosystem, from policymakers and funders to physicians and patients, has something to offer and gain. The APAC Liver Alliance aims to unite all stakeholders to tackle the rising liver disease epidemic in the region. Investing in these diseases offers a positive return on investment and the opportunity to reduce suffering and death for millions every year.

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