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Economist Intelligence Unit Report Calls for Global Policy Innovation to Tackle the ‘Silent Pandemic’ that is Hepatitis C

- Experts recommend comprehensive approach to combat global health issue -

London, 15 January 2013 - A new Economist Intelligence Unit (EIU) report titled *The Silent Pandemic: Tackling Hepatitis C with Policy Innovation*, made possible as a result of an educational grant from Janssen Pharmaceutica NV and published today, highlights the urgent need for countries around the world to develop strategies to tackle head-on the growing social and economic issues associated with Hepatitis C (HCV).¹

To view the Multimedia News Release, please click [here](#).

While the total number of infected individuals is unknown due to a lack of available data, the World Health Organization (WHO) estimates that approximately 150 million people globally are currently living with the blood-borne infectious disease, HCV.² Of these, up to two thirds will develop chronic liver disease and one in five will develop cirrhosis.² HCV is also the leading cause of liver transplantation worldwide¹ and in the US the disease now accounts for more deaths than HIV/AIDs.¹

“The report highlights that worldwide, despite the significant burden of HCV, governments have failed to get a grip on the scale and impact of the disease,” said Charles Gore, President of The World Hepatitis Alliance. *“In both developed and developing countries, the true human and economic cost of HCV will continue to rise unless policy makers confront this urgent public health issue now.”*

Despite the devastating effects of HCV, the report states that it is now considered preventable and with modern treatments, the majority of sufferers can become clear of the virus.¹ The report notes, however, that as few as 10% of patients are currently receiving treatments and there is a large disparity in care across countries.¹ As a result, the report calls for countries to take a *“comprehensive approach,”* which takes into account local needs and resources available. This includes the following:¹



- **Effective disease surveillance** to create an accurate picture of the problem and ensure effective policies can be developed. The report claims that too few countries – developed or developing – have recently conducted the epidemiological studies necessary for good policy-making at a national, let alone a local level. According to the EIU, 16 countries in the EU alone have epidemiological data that is either poor or non-existent.¹
- **Better public awareness** is needed to help remove the stigma associated with the disease and create better understanding of HCV.¹ A survey by the European Liver Patients Association found that only 20% of those diagnosed had heard of hepatitis B or C before being told they had it.¹ (Full results from the ELPA survey are available at: <http://www.hepbcppa.org/wp-content/uploads/2011/11/Report-on-Patient-Self-Help.pdf>).
- **Prevention measures** to reduce high-risk behaviour and improve education on healthy lifestyle choices for those already infected. The report also calls for measures to prevent transmission via healthcare systems, which is the major route of transmission of HCV in developing countries.¹
- **Innovative ways to reach out to patients** to ensure those who need treatment receive it before irreversible conditions develop.¹

“The report highlights that each country has different needs and resources; however, we urge all those involved in the management of HCV and public health to help increase awareness of the disease and look at the most effective ways of delivering effective treatment to those most in need,” said Gaston Picchio, Global Hepatitis Disease Area Leader, Janssen. *“Janssen is committed to working with the HCV community and will continue to engage with healthcare professionals, government officials and patient advocates around the world to support their efforts to eliminate HCV one patient at a time.”*

A full copy of the EIU report and supporting materials, including an info-graphic, are available [here](#).

- Ends -



About HCV

Hepatitis C (HCV) is a blood-borne infectious disease that affects the liver.^{3,4} With an estimated 150 million people infected worldwide,² and three to four million people newly infected each year, HCV puts a significant burden on patients and society.⁵ Estimations indicate that HCV caused more than 86,000 deaths and 1.2 million disability-adjusted life-years (DALYs) in the WHO European region in 2002 (latest data available).⁶ Chronic infection with HCV can lead to liver cancer and other serious and fatal liver diseases.⁷ About one-quarter of the liver transplantations performed in 25 European countries in 2004 were attributable to HCV (latest data available).⁶

About Janssen

At Janssen, we are dedicated to addressing and solving some of the most important unmet medical needs of our time in oncology, immunology, neuroscience, infectious diseases and vaccines, and cardiovascular and metabolic diseases. Driven by our commitment to patients, we develop innovative products, services and healthcare solutions to help people throughout the world. Please visit <http://www.janssen.com> for more information.

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References:

1. Economist Intelligence Unit. 2012. The Silent Pandemic: Tackling Hepatitis C with Policy Innovation. Available at: <http://www.janssen-emea.com/The-silent-pandemic>
2. World Health Organization. Hepatitis C Fact Sheet. Available at: <http://www.who.int/mediacentre/factsheets/fs164/en/index.html> (last accessed December 2012)
3. Simin, M *et al.* 2007. Cochrane systematic review: pegylated interferon plus ribavirin vs. interferon plus ribavirin for chronic hepatitis C. *Alimentary Pharmacology & Therapeutics* 25 (10): 1153-62.
4. Centres for Disease Control and Prevention. Hepatitis C FAQs. Available from: <http://www.cdc.gov/hepatitis/C/cFAQ.htm#transmission> (last accessed December 2012)
5. WHO. State of the art of vaccine research and development. *Viral Cancers*. Available from: http://www.who.int/vaccine_research/documents/Viral_Cancers.pdf (last accessed December 2012)
6. Mühlberger, N *et al.* 2009. HCV-related burden of disease in Europe: a systematic assessment of incidence, prevalence, morbidity, and mortality. *BMC Public Health* 9 (34): 1-14.
7. Lang K & Weiner DB. 2008. Immunotherapy for HCV infection: next steps. *Expert Review of Vaccines* 7 (7): 915-923.