



# Access to DAAs among HCV, HCV/HIV co-infected patients in Central/Eastern Europe and the epidemiological characteristics of ESLD in this region - data from the ECEE Network Group

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## Background

- There is currently urgent need to equalize hepatitis care for HIV positive patients across Europe
- We have investigated the epidemiological prevalence and treatment availability for the end stage liver disease in HIV/HCV/HBV coinfections in countries represented in ECEE Network Group

## Methods

- Euroguidelines in Central and Eastern Europe (ECEE) Network Group was initiated in February 2016 to review standard of care for HIV infection in the region
- Information about HIV/HCV /HBV, co-infections and availability for the end stage liver disease treatment in HIV positive patients were collected through on-line surveys
- Respondents were ECEE members from16 countries from the region

## Results

- HIV/HCV coinfection rate was from 3% to 99% (data not available for one country) (Table 1)
- The range of reported percentage of HIV/HBV coinfection was from 2,3% to 40% (data not available for two countries) (Table 1)
- HCV/HBV and HIV coinfection was ranging from 0% to 9% (data not available for three countries) (Table 1)
- The source of information on coinfection prevalence was WHO, national HIV programmes, articles published in international scientific journals, single clinic reports and research material in ten (62,5%) countries and source not provided in six (37,5%) countries (Table 1)
- Regarding treatment for the end stage liver disease only in two (12%) countries liver transplantation was an available option for HIV positive patients (Figure 1)

## Conclusions

- Our findings showed lack of treatment options for the end stage liver disease in HIV positive patients in the vast majority of Central and Eastern Europe Countries
- There are gaps in epidemiological surveillance in this region
- We observe many differences in number of co-infected patients among Central/Eastern Europe and neighboring countries and there is no unification of the source of information

Figure 1. Availability of end stage liver disease treatment for HIV patients in Central and Eastern Europe

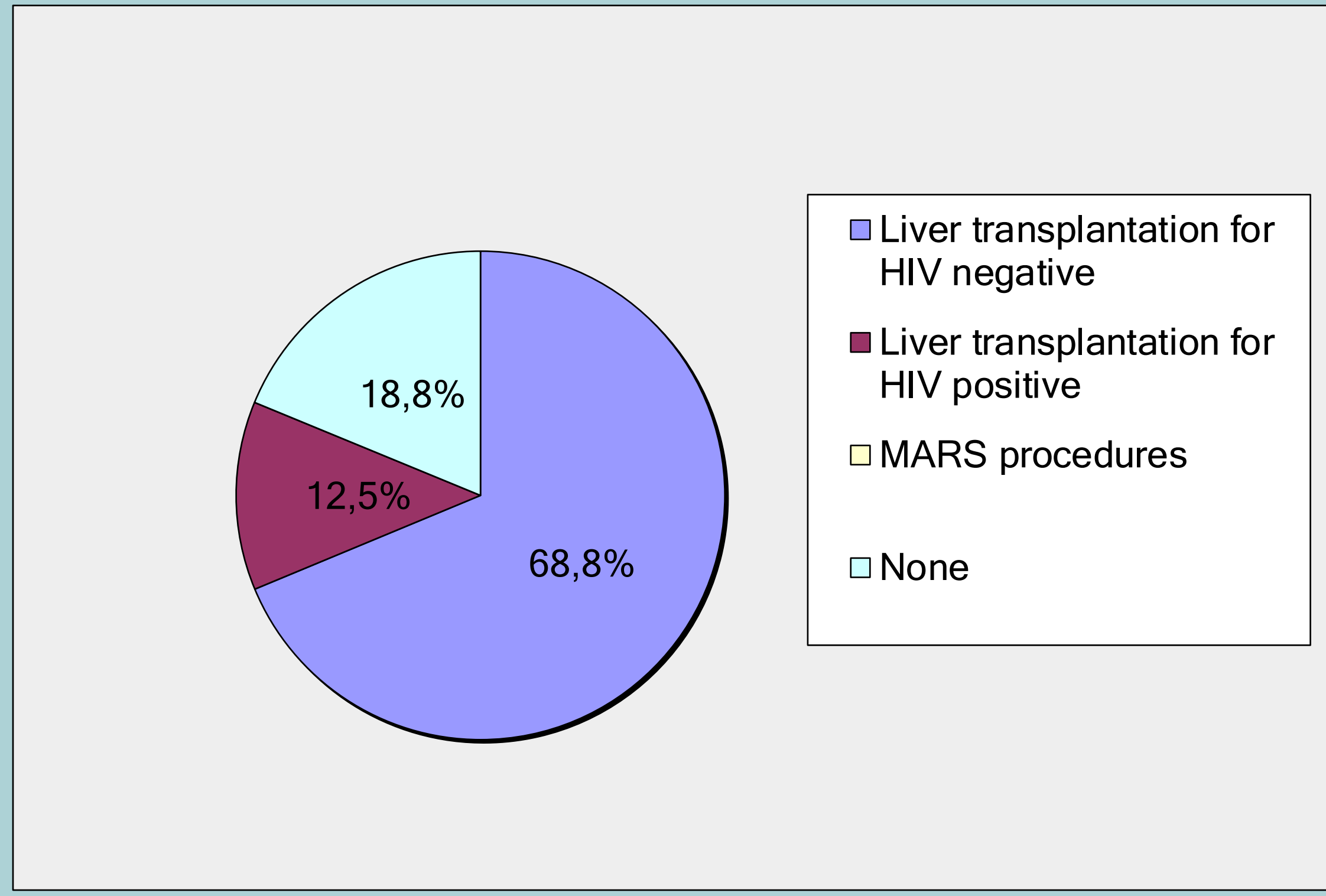


Table 1. HIV and viral hepatitis coinfections- results from the on-line survey

Country	HIV/HCV estimated number(N) or percent(%)	HIV/HBV N or %	HIV/HCV/HBV N or %	Source of information
Bulgaria	25,6%	10,4%	3,3%	Alexiev, Ivailo, et al. "High Rate of Hepatitis B and C Coinfections Among People Living with HIV-1 in Bulgaria: 2010–2014." AIDS research and human retroviruses 33.3 (2017): 228-229.
Bosnia and Herzegovina	6%	4%	none	Data from the Clinic for Infectious Disesease in Sarajevo
Estonia	95-99%	4-5%	4,5%	unknown
Armenia	13,9%	2,3%	0,24%	WHO. HIV Programme Review in Armenia
Greece	12,8%	3%	0,09%	Touloumi G, AMACS Cohort, 2013 data, unpublished and Vourli G, HepHIV Conference in Athens 2015
Republic of Moldova	16,5%	6,4%	5%	Monitorizarea controlului infectiei HIV , anul 2016 in Republica Moldova
Romania	20%	10-40%	9%	Country progress report on AIDS 2016; Ruta S High prevalence of hepatitis B markers in Romanian adolescents with HIV – MedgenMed 7 (1) :68 , 2005; Compartment for Monitoring and Evaluation of HIV/AIDS in Romania “Matei Bals” National Institute for Infectious Diseases
Poland	33% 5,7%	15% 4%	7% unknown	unknown Skamperle M et al. Acta Dermatoven APA 2014; 23: 25-6.
Slovenia				unknown
Croatia	39 (N) 3-5%	4% 17-20%	<1% 1,5-2%	Infectious Disease Service, University Hospital center of Tirana
Albania				National HIV Center
Hungary	100 (N) per 2000 HIV-positive	70 (N) per 2000 HIV-positive	10 (N) per 2000 HIV-positive	
Turkey	2000 (N)	6000 (N)	1000 (N)	unknown
Ukraine	unknown	unknown	unknown	unknown
	25%	4,5%	1,7%	Phd of dr Jovan Ranin- infectologist, HIV clinician
Serbia				
Georgia	3300 (N)	unknown	unknown	unknown

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