

Hetz – Israel Association for the Health of the Liver

NGO – hepatitis patient group

Kibbutz Tzora, Israel
www.hetzliver.org

SURVEY HIGHLIGHTS

The respondent reviewed 25 items of information that the government of Israel reported for the 2013 World Health Organization Global Policy Report on the Prevention and Control of Viral Hepatitis in WHO Member States.

✓ The government information was thought to be accurate for **48.0%** of items.

Survey points marked "accurate":
1.2, 3.5, 4.1, 4.2, 4.3, 4.5, 4.6, 4.7, 4.8, 5.1, 5.2 and 5.5.

✗ The government information was thought to not be accurate for **52.0%** of items.

Survey points marked "not accurate":
1.1, 1.3, 2.1, 2.2, 3.1, 3.2, 3.3, 3.4, 4.4, 4.9, 4.10, 5.3 and 5.4.

Survey comments from Hetz – Israel Association for the Health of the Liver:

Information reported by government (2012–2013)

Civil society respondent comments (2014)

✓ To our knowledge, this information is accurate.

4.2 The government has not established the goal of eliminating hepatitis B.

There is a vaccination plan for hepatitis B but not a screening plan.

✗ To our knowledge, this information is not accurate.

4.4 There is a national policy specifically targeting mother-to-child transmission of hepatitis B (Annex B).

The Hetz Association is struggling for this in the parliament.

4.9 There is a national policy relating to the prevention of viral hepatitis among people who inject drugs.

The Hetz Association is working on this issue.

Statement from Hetz – Israel Association for the Health of the Liver regarding key hepatitis policy issues in Israel:

The greatest problem is the lack of a national plan for the eradication of hepatitis, which includes a national screening programme that focuses on screening at-risk populations.

What needs to change?

- The adoption and funding for implementation of a national plan for eradicating hepatitis by the Israeli government, which should mainly include: (1) the establishment of a national hepatitis registry, (2) screening programme, (3) programme for eradicating hepatitis in prisons, (4) programme focusing on people who inject drugs, (5) clear measures of success such as increasing the number of diagnosed patients and increasing the number of patients receiving treatment.

- The government's role is to adopt, fund and implement a national plan for eradication of hepatitis. The government should (1) appropriately fund the implementation of the plan, starting with screening of at-risk populations, (2) formally appoint a person whose role will be to lead coordination of the implementation, (3) work closely with the patient association and the physician association in drafting the plan and implementing it, (4) formally support World Hepatitis Day by initiating activities and campaigns to raise awareness about the importance of being tested and treated, (5) financially support the patient association.

Other roles and responsibilities:

- Parliament should be more active in addressing hepatitis, passing relevant laws (such as compensation for patients who acquired the virus in government hospitals) and demanding that government acts vigorously to eradicate it.

- Physicians should agree on the optimal care path for patients, including what the role of the family physician is, and other health professionals.

Evidence supporting our viewpoint:

- New local analysis proves hepatitis C screening is cost-effective.
- The viral time-bomb: Local hepatologists agree that hepatitis C complications will increase steeply in the next five to ten years, which will lead to a steep increase in health expenditure on cirrhosis, liver cancer and liver transplants.
- New parliamentary research report supports compensation of patients who acquired the virus in government health facilities.
- Free testing offered during World Hepatitis Day 2013 resulted in many newly diagnosed patients – proving the value of media campaigns and accessible testing services.