

# Taiwan (Chinese Taipei)

## Taiwan Liver Research Foundation\*

Private foundation

Kaohsiung, Taiwan (Chinese Taipei)  
<http://liver.club.kmu.edu.tw/>

### SURVEY HIGHLIGHTS

The Government of Taiwan (Chinese Taipei) was not invited to respond to the World Health Organization survey for the 2013 [Global Policy Report on the Prevention and Control of Viral Hepatitis in WHO Member States](#) because it is not a WHO Member State. Therefore the Taiwan Liver Research Foundation could not comment on government information for this report.

**The organisation provided the following general statement regarding key hepatitis policy issues in Taiwan (Chinese Taipei):**

#### **Awareness-raising, partnerships and resource mobilisation.**

Disease awareness remains a critical issue in our country. We're pleased to address this issue by working closely with many non-profit organisations in Taiwan. The achievement has been much beyond what our government has done. We have learned and shared constructive strategies with many domestic and foreign allies.

We have recently seen a friendly change at the Ministry of Health and Welfare regarding hepatitis screening, with screening efforts incorporated into a nationwide health check-up programme. We are making every effort to raise disease awareness in our community by means of public education, free screening and symposia held for medical professionals. Of note was that we created a strategy aiming to have young children teach their parents and families about hepatitis prevention and the importance of disease awareness.

**Screening, care and treatment.** As hepatitis C virus (HCV) infection is often asymptomatic and could easily remain undiagnosed, screening in a community-based setting becomes an important task. With the progressive emergence of HCV/HIV coinfection in intravenous drug users, the prognosis and outcome of HCV infection will be exacerbated. Therefore, searching for HCV reservoirs becomes an essential step, both in the general population as well as in high-risk groups.

We have conducted more than 20 voluntary mass screening sessions in residents. The items include HBsAg, anti-HCV, transaminases, alpha-fetoprotein, and abdominal ultrasonography. All anti-HCV-positive subjects will be tested further for HCV RNA. Meanwhile, a self-administered questionnaire is designed to identify possible routes of infection. We also have provided examinations for people at high risk of HCV infection, such as haemodialysis patients, intravenous drug users, HIV-infected patients and those patients requiring periodic transfusion.

HCV is a curable disease at present. The key points of preventing and reducing the burden of HCV are early diagnosis, effective preventing programmes, and appropriate treatment. As the screening, diagnosis, and treatment of HCV infection continues to evolve with the availability of more effective yet more costly treatments, the cost of care will continue to rise.

However, this increasing cost of care may still be acceptable and justifiable if it results in an accompanying improvement in quality-adjusted life years and amelioration of related morbidity and mortality. Therefore, medical accessibility and disease awareness remain critical steps for a better chance of curing people with hepatitis C. We provide free transportation for indigenous people living in mountainous areas and for poor people to access medical care for their hepatitis C infection.

\* World Hepatitis Alliance member.