INTRODUCTION

The introduction of highly efficacious pan-genotypic therapies for hepatitis C virus (HCV) infection has made the elimination of HCV an attainable goal.

OBJECTIVES

- This study assessed the progress made in 45 high-income countries and territories towards meeting the 2030 HCV elimination targets set by the World Health Organization (WHO) for incidence, mortality, diagnosis, and treatment.

METHODS

- A previously published Markov disease progression model of HCV infection was populated with demographic and epidemiological inputs for 45 high-income countries and territories from the United Nations World Population Prospects and the Polaris Observatory, respectively.
- Primary modification to the published model was the calculation of incidence.
- Future incidence was assumed to change at the same annual rate as prevalence.
- Despite the introduction of curative therapies, 80% of high-income countries and territories would meet the WHO's 2030 targets to eliminate HCV.

RESULTS

- Of 45 high-income countries and territories, 30 were projected to not eliminate HCV before 2050.
- Nine (Australia, France, Iceland, Italy, South Korea, Spain, Switzerland, and the United Kingdom) were on track towards eliminating HCV by 2030.
- Three (Australia, Germany, and Malta) were projected to eliminate HCV by 2040, and three more (Canada, Singapore, and Saudi Arabia) by 2050.
- The number of high-income countries and territories that failed to meet each WHO target for HCV elimination was: 34 (incidence), 30 (mortality), 20 (diagnosis), and 26 (treatment).

CONCLUSIONS

- Despite the introduction of curative therapies, 80% of high-income countries and territories are not on track to meet the WHO's targets that would eliminate HCV as a public health threat by 2030, and 67% are off-track by at least 20 years.
- Immediate action to improve HCV diagnosis and treatment is needed to make the global elimination of HCV by 2030 an attainable goal.

REFERENCES