# Viral hepatitis in HIV-positive patients – testing, prophylaxis and treatment in Central and Eastern Europe

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## **Background**

- Because of shared routes of transmission hepatitis C (HCV) and hepatitis B (HBV) are the most common co-infections in people living with HIV (PLWH).
- All PLWH should be vaccinated against HBV and hepatitis A virus (HAV) and treated for HBV and HCV due to increased risk of developing end-stage liver disease.
- We aimed to describe testing, prophylaxis and treatment of viral hepatitis in PLWH in Central and Eastern Europe.

### **Methods**

- Data was collected from Euroguidelines in Central and Eastern Europe Network Group (ECEE) through on-line survey
- 18 countries from ECEE participated in survey: Serbia, Turkey, Bosnia and Herzegovina, Romania, Bulgaria, Croatia, Estonia, Ukraine, Hungary, Greece, Albania, Armenia, Czech Republic, Georgia, Belarus, Slovakia, Lithuania, Poland, four countries had information from two centers.

#### **ECEE Network Group**

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## **Results**

- In total 21 of 22 (95%) centers in ECEE screen all PLWH for HCV antibodies and for HBsAg.
- In 20 centers (91%) HCV testing is free of charge either covered by governmental programs (five centers (23%)) or by health insurance (15 centers (68%)), in two centers (9%) PLWH have to pay.
- All centers have access to DAAs, only six centers (27%) have no limitations for treatment access.
- HbsAg testing is covered by governmental programs in four centers (18%), by health insurance in 15 centers (68%), in three centers (14%) HBsAg screening is available as paid service.
- 13 centers (59%) vaccinate all PLWH against HBV, it is free of charge in 11 centers (50%).
- In HIV/HBV co-infected patients 20 centers (91%) use tenofovir-based regimen.
- Only 12 centers of 22 (55%) screen for HAV IgG, and three centers (14%) vaccinate all PLWH against HAV, vaccination is free of charge in six centers (29%).

## Conclusion

- Testing for viral hepatitis in PLWH in ECEE is sufficiently good
- Vaccination against HBV especially against HAV has room for improvement
- HCV treatment access needs rectification in entire ECEE.

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