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On World Hepatitis Day it's time to talk about HIV and hepatitis C

On World Hepatitis Day, the National Association of People with HIV Australia (NAPWHA), the Australian Federation of AIDS Organisations (AFAO), the Kirby Institute and Hepatitis Australia are raising awareness about HIV and hepatitis C (HCV) co-infection.

An estimated 3,000 Australians are living both with HIV and HCV. HCV is more prevalent among people with HIV than in the broader population and is a major risk for health complications in people with HIV. HIV worsens hepatitis C-related liver disease, fastens the progression to cirrhosis, and leads to higher rates of death from both liver failure and liver cancer.

Unlike HIV, HCV is curable. A simple blood test can determine whether someone has HCV and new, extremely effective hepatitis treatments — called direct-acting antivirals (DAA) — are now approved in Australia and available on the Pharmaceutical Benefits Scheme (PBS). This means that they are subsidised and people only have to pay a small co-payment (usually \$38.30, or \$6.20 for concessions).

The Kirby Institute at UNSW Australia is currently recruiting for a study called CEASE, designed to control and eliminate HCV among Australia's HIV-positive population. People with HIV/HCV co-infection in Queensland, NSW, Victoria and South Australia are invited to enrol by contacting Clinical Project Coordinator Arlen Wilcox on: (02) 9385 9970; or at awilcox@kirby.unsw.edu.au

David Pieper, who was cured of hepatitis C while on the CEASE trial, says: "I found having hep C on top of HIV really difficult. I was worried that it might progress to cirrhosis or liver cancer, but after treatment with the DAAs I am completely cured. The side effects were nothing compared to previous treatments that I tried, and I'm really happy that my participation in the trial will hopefully help eliminate hep C among people currently living with both HIV and hep C."

A course of DAA treatment can range from 8 to 24 weeks. Treatment is largely well tolerated with minor side effects; the cure rate is around 95 percent. All Australian adults diagnosed with chronic hepatitis C (genotypes 1, 2 and 3) and who hold a Medicare card are eligible to access DAA treatment regardless of the stage of the illness. "Widespread uptake of HCV treatment will not only lessen liver disease and death but reduce ongoing HCV transmissions," says Associate Professor Gail Matthews from the Kirby Institute, who leads the CEASE study.

AFAO Chief Executive Officer Darryl O'Donnell says: "The landscape of hepatitis C treatment has changed dramatically. For people living with HIV, regular hepatitis C screening is important as it allows for treatment if you have hep C. All people with HIV should be tested for hepatitis A and B and, if unprotected, should discuss vaccination with their doctor."

NAPWHA President Cipri Martinez also urges all people with HIV at risk of hepatitis C co-infection to regularly screen for HCV and, if need be, to discuss treatment with their doctor. "Access through the PBS to highly effective HCV treatment has the potential to eradicate hepatitis C from HIV-positive communities," says Martinez.

For media comment, please contact:

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