Article Summary

**Australia Needs to Increase Testing to Achieve Hepatitis C Elimination**


**Overview**

Australia has seen high initial uptake of hepatitis C virus (HCV) treatment, but is the country’s HCV testing rate sufficient to sustain the treatment levels needed to achieve the World Health Organization’s (WHO) 2030 elimination goals?

This new study published in March 2020 in The Medical Journal of Australia found that Australia won’t meet the WHO’s HCV 2030 deadline unless testing is increased by 50%.

**Background**

Previous research has found that if HCV testing and engagement with care in Australia does not exceed the levels prior to 2016, when highly effective direct-acting antiviral (DAA) treatments were introduced, then the number of people treated will decline as the number of diagnosed and treatment-ready patients declines.¹

**Study Design**

This new study assessed Australia’s progress towards elimination two years after the introduction of DAA treatments.

This study analyzed data on HCV testing and treatment in Australia from two datasets to identify trends and then used mathematical modelling to assess how different testing and treatment levels would affect progress toward the WHO’s 2030 elimination target.

**Key Findings**

When comparing the two years before and after the introduction of DAAs, average annual treatments initiated for people with HCV increased more than 300%, from 6,747 to 28,022.

Average annual diagnostic RNA tests increased 37%, over the same time period, from 17,385 to 23,819.

If current trends in testing and treatment continue, only 72% of infected people would be treated by 2030.

If Australia’s current trends in testing and treatment continue, the incidence of HCV in 2030 would be only 59% lower than in 2015, well short of the WHO target of an 80% reduction.

To eliminate HCV as a public health threat in Australia by 2030, HCV elimination programs should maintain treatment uptake by focusing on increased testing and linkage to care.