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Supporting the HIV, Viral Hepatitis and Sexual Health Workforce

Media Release

ASHM and leading experts affirm Direct Acting Antiviral (DAA) therapy for hepatitis C is effective

Sydney, Australia, 16 June 2017

The Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM) stand united with leading health professionals involved in the treatment of hepatitis C to strongly reject the conclusions drawn by a [Cochrane Review report](#)¹ first published on 6 June 2017 by [Cochrane Hepato-Biliary Group](#), which analysed data from a number of clinical trials to examine whether there is evidence that direct-acting antiviral (DAA) therapy prevents liver disease, liver cancer or death.

The Cochrane Review analysed clinical trials designed to evaluate the virological efficacy of new DAA drugs. The trials were not designed to assess morbidity and mortality. There is however, strong evidence and clear data from a large number of studies that clearing hepatitis C reduces the risk of liver cancer and liver failure, as well as reducing mortality.

Dr David Iser, ASHM Board Director and VMO Gastroenterologist in the Infectious Diseases Clinic, and St Vincent's Hospital affirms, "The Cochrane report is factually incorrect. The analysis of clinical trials in the report unfortunately only include short-term outcomes of treatment; and chronic hepatitis C virus infection can take many years to cause chronic liver disease."

"Treating the more than 200,000 people in Australia living with chronic hepatitis C is expected to significantly reduce the burden of liver disease in the future"

A [Consensus Statement for Australian recommendations for the management of hepatitis C for virus infection](#)

issued in January 2017 by an expert panel representing the [Gastroenterological Society of Australia](#) (Australian Liver Association), the [Australasian Society for Infectious Diseases](#), the [Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine](#), the [Australasian Hepatology Association](#), [Hepatitis Australia](#) and the [Royal Australian College of General Practitioners](#) – states:

"Successful viral eradication is defined as undetectable plasma HCV RNA using a highly sensitive PCR assay 12 weeks after completion of DAA therapy (SVR). People who do not have cirrhosis and who have normal liver function test results after SVR have no further need of specialist liver services and can be medically managed as if they never had HCV infection.²"

The authors of the Cochrane Report say, "it is questionable if sustained virological response [SVR] has any clinical relevance to the person with chronic hepatitis C¹".

Dr David Iser counters, "This is simply factually incorrect – there is abundant evidence that SVR following treatment of hepatitis C improves survival, and reduces deaths from cirrhosis and liver cancer."

"Patients should not be swayed by this flawed report and should not defer seeking treatment based on this study," Dr Iser urges.

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Following the listing on the PBS in March 2016 of DAA therapy for ALL Australians living with hepatitis C (regardless of fibrosis stage or drug and alcohol use) Australia is now placed as one of the few countries globally to be able to achieve elimination of this virus from the population.

In the first year of DAA listing over 33,000 Australians have commenced therapy with very high rates of treatment success. “ASHM continue to encourage health professionals to discuss DAA treatment with any patients living with hepatitis C. Continuing high rates of treatment uptake over the next decade will translate into major reductions in the burden of liver disease into the future.”

Experts affirming the efficacy of Direct Acting Antiviral (DAA) therapy for hepatitis C treatment

The ASHM Statement regarding the Cochrane Review Report is supported by a number of leading specialists and primary care providers involved in the treatment of hepatitis C, including:

- **Dr Claire Italiano**, Infectious Diseases Physician, Royal Perth Hospital, Perth
- **Dr David Iser**, VMO Department of Gastroenterology, St Vincent’s Hospital, Melbourne; and Infectious Diseases Unit, The Alfred Hospital, Melbourne
- **A/Prof Gail Matthews**, Infectious Diseases Physician, The Alfred Hospital, Melbourne
- **Dr Trent Yarwood**, Infectious Diseases Physician at Cairns Hospital, Cairns
- **Dr Olga Vujovic**, Infectious Diseases Physician, The Alfred Hospital, Melbourne
- **Dr David Shaw**, Infectious Diseases Physician at Royal Adelaide Hospital, Adelaide
- **Dr Joe Sasadeusz**, Victoria Infectious Diseases Service, Royal Melbourne Hospital
- **Prof Margaret Hellard**, Deputy Director (Programs); Adjunct Professor, Monash University, DEPM, Burnet Institute, Melbourne
- **Dr Joseph Doyle**, Deputy Program Director, Disease Elimination; Co-Head, Viral Hepatitis Research; Burnet Institute, Melbourne

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1. Cochrane Database of Systematic Reviews 2017, Issue 6. Art. No. CD012143. DOI: 10.1002/14651858.CD012143.pub2
 2. Hepatitis C Virus Infection Consensus Statement Working Group. Australian recommendations for the management of hepatitis C virus infection: a consensus statement (January 2017). Melbourne: Gastroenterological Society of Australia, 2017
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About the Australasian Society for HIV Medicine (ASHM)

ASHM is a peak organisation of health professionals in Australia and New Zealand who work in HIV, viral hepatitis and sexually transmissible infections (STIs). Our vision is to see the virtual eradication of HIV, viral hepatitis and sexually transmissible infections. Our mission is to support the health workforce achieve this—through education and training; policy and advocacy; direct action and leadership.

Media enquiries

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