

## **São Paulo Declaration on Hepatitis World Hepatitis Summit 2017**

We, the high level representatives of governments who assembled at the World Hepatitis Summit in São Paulo, Brazil, from 1 to 3 November 2017;

1. Note, with deep concern, that 325 million people were living with chronic hepatitis infections worldwide and 1.34 million people died of viral hepatitis in 2015<sup>1</sup>;
2. Consider that viral hepatitis is a serious global public health problem and express concern at the lack of progress in its prevention and control in developing countries, notably due to the lack of an integrated approach to prevention and control measures as well as the inadequate access to affordable, appropriate treatment and care;
3. Note that hepatitis A and B can be prevented by vaccination and that there is a cure for hepatitis C and treatment for hepatitis B, while recognizing that hepatitis C is still not preventable through vaccination;
4. Recognize the need for a global approach to eliminating viral hepatitis as a public health problem through preventing, diagnosing, treating and surveillance of all forms of viral hepatitis – with a special focus on viral hepatitis B and C, which have the higher rates of morbidity and mortality;
5. Express profound concern about the public health, economic and social impact of viral hepatitis and inadequate response globally to date;
6. Reaffirm the Global health sector strategy on viral hepatitis 2016-2021 adopted by Resolution WHA69.22 as well as World Health Assembly Resolutions WHA45.17, WHA63.18, WHA67.6 and WHA69.11 and recalling the 2015 Glasgow Declaration on Hepatitis;
7. Emphasize the importance of a comprehensive, integrated and multisectoral approach that includes implementation of high-impact viral hepatitis prevention and control measures as outlined in the Global health sector strategy on viral hepatitis 2016-2021;
8. Acknowledge countries' goals toward achieving universal health coverage and recognize the importance of health systems strengthening in this respect, including in the provision of and access to comprehensive community-based services and for the prevention and control of viral hepatitis, with particular attention to populations most affected and at risk, and that each country should define the specific populations within their country that are most affected by viral hepatitis epidemics and the response should be based on the epidemiological and social context;
9. Further recognize the need to strengthen health systems and integrated collaborative approaches and synergies between prevention and control measures for viral hepatitis, and those for infectious diseases such as HIV and other related sexually transmitted and bloodborne infections, those for mother to child transmitted diseases and those for cancer and other non-communicable diseases;

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<sup>1</sup> Source: WHO. Global Hepatitis Report, 2017

10. Recognize the importance of having strong, integrated strategic health information systems, that can provide publicly accessible information while ensuring protection of personal data, including epidemiological surveillance systems to better inform decision makers, focus and improve national planning, target-setting and monitoring the national and global response;
11. Highlight the need to mobilize adequate and predictable resources for the viral hepatitis response, especially in low and middle income countries, and to improve equitable access to and availability of quality, effective, safe diagnostics, vaccines, services and treatment and making them affordable at the country level to combat hepatitis and eliminate viral hepatitis as a public health threat by 2030;
12. Recognize with appreciation the introduction of new pharmaceutical products based on investment in innovation for hepatitis B and C in recent years, and note with great concern the increasing cost to health systems and patients and also recognize the need to address this situation, including through promoting synergies in this context;
13. Recall that national ownership and a comprehensive approach are key elements for the success of the viral hepatitis response as well as the availability of adequate, sustained financial resources and trained human resources, complemented by international resources and technical assistance where needed;
14. Call on governments to include hepatitis B vaccines in national immunisation programmes, including for health workers as needed, feasible and appropriate, with regard to the national epidemiological situation, and expressing concern that currently the global hepatitis B vaccine coverage for infants is estimated at 84% and is therefore below the 90% global target, and concerned that current global coverage for birth dose of hepatitis B vaccine, to prevent mother-to-child transmission, is only 39%<sup>2</sup>, lower than the 50% global target by 2020 and the 90% target by 2030;
15. Reaffirm also the rights of governments to the full use of the flexibilities in the WTO Agreement on Trade-related Aspects of the Intellectual Property Rights (TRIPS) to increase access to affordable, safe, effective and quality medicines, and note that, inter alia, intellectual property rights are an important incentive in the development of new health products;
16. Acknowledge the need for new models of people-centered service delivery, including for early diagnosis, if we are to achieve global viral hepatitis targets in accordance with nationally set goals and priorities towards achieving Universal Health Coverage;
17. We reaffirm the right of everyone to the enjoyment of the highest attainable standard of physical and mental health and resolve to fulfill our international obligations and commitments in this regard, and, in the context of viral hepatitis, with particular attention to populations most affected and most at risk and that each country should define the specific populations within their country that are most affected by viral hepatitis epidemics and the response should be based on the epidemiological and social context;
18. We will fully implement the Global health sector strategy on viral hepatitis 2016-2021,

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<sup>2</sup> Source: WHO. Global Hepatitis Report, 2017

adapted to national priorities, legislation and specific contexts, and reaffirm its five strategic directions: information for focused action; interventions for impact; delivering for equity; financing for sustainability; and innovation for acceleration, towards achieving the goal of eliminating viral hepatitis as a public health threat by 2030;

19. We will accelerate the implementation of the core interventions outlined in the Global health sector strategy on viral hepatitis 2016-2021, adapted to national priorities, legislation and specific contexts: hepatitis B vaccination; prevention of mother-to-child transmission of hepatitis B; blood safety; injection safety; harm reduction; testing services and treatment;
20. We will accelerate implementation of the priority actions as outlined under each of the five strategic directions of the Global health sector strategy on viral hepatitis 2016-2021, adapted to national legislation, priorities and contexts;
21. We will continue to strengthen international cooperation to achieve the goals of the Global health sector strategy on viral hepatitis 2016-2021 including by enhancing sustainable, national and regional manufacturing capacity for quality, safe, effective and affordable vaccines and technologies through collaboration and exchange, as appropriate;
22. We will develop and implement as appropriate, comprehensive, funded national hepatitis plans and programmes in collaboration with WHO and other relevant stakeholders for effective and sustainable results;
23. We will continue to improve the mobilization of adequate and predictable resources for the viral hepatitis response, especially in low and middle income countries, and to promote equitable access to and availability of quality, effective, safe diagnostics, vaccines, services and treatment and making them affordable at the country level;
24. We call upon WHO to provide technical support and assistance in order to accelerate the implementation of the Global health sector strategy on viral hepatitis 2016-2021 towards the elimination of hepatitis as a public health threat;
25. We thank the Government of Brazil for hosting and supporting this World Hepatitis Summit.