

## **ASSESSING THE POLICY RESPONSE TO HEPATITIS C IN THE NORDIC COUNTRIES: THE HEP-NORDIC STUDY**

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### **Background:**

In 2016, the World Health Assembly approved the first global health sector strategy on viral hepatitis, an important step towards disease elimination. In the Nordic countries (Denmark, Finland, Iceland, Norway, Sweden), the prevalence of hepatitis C virus (HCV) in the general population is low, but it is 50%-85% among people who inject drugs. A comparison of policies regarding HCV elimination across the Nordic countries is lacking. This study assessed which policies the five countries have established to support key elements of a public health response to HCV.

### **Methods:**

Fourteen national stakeholders representing government agencies, medical societies, and NGOs completed a 23-item cross-sectional online survey about how their country's policies address the HCV epidemic. Questions were organized into four domains: national coordination, prevention, testing and linkage to care, and treatment. A descriptive analysis summarises findings by domain, country, stakeholder group, and presents discrepancies.

### **Results:**

Stakeholders reported that three of the five study countries have national strategies for viral hepatitis, though only one has an HCV elimination goal. Four of the countries have national HCV treatment guidelines. Respondents reported a lack of access to anonymous HCV testing in all countries, although all countries do make publicly funded direct-acting antiviral treatment available. The availability of harm reduction services varied widely. In-country stakeholder disagreement (20.4%-75.8%) regarding current policies was observed across the region. NGOs in the region were the stakeholder group to most often respond incorrectly (39%) to HCV policy questions.

**Conclusion:**

This study was the first to analyse policy responses to HCV in the Nordic region. It found that efforts varied among countries and that stakeholders often disagreed on which policies were in place. Results can be used to identify gaps in HCV prevention, testing, treatment and care policies.

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