

## BRAZIL

**SITUATION** In partnership with the Ministry of Health (MOH), new data released by the Center for Disease Analysis Foundation (CDAF) and its Polaris Observatory team showed fewer Brazilians infected by hepatitis C (HCV) than previously estimated. Instead of an estimated 1.6 million cases, the data show that the number of people infected in Brazil was closer to 657,000. The MOH quickly realized eliminating the disease is within reach, but more work must be done.

**OUR WORK** Over the past five years CDAF has worked closely with the Pan American Health Organization (PAHO) and the Brazilian government. In 2017, the MOH approached CDAF to assess the current disease burden and develop a strategy for managing hepatitis C. We collaborated with local experts and government ministries to find and access the best data that is not otherwise available. Through this collaboration we learned that the disease prevalence was lower than original estimates – and that it would therefore cost less than anticipated to achieve World Health Organization (WHO) elimination targets. We sat down with a panel of stakeholders, including physicians, gastroenterologists, hepatologists and officials from the MOH to explore possible strategies for addressing the infection rate. Our approach involved running scenarios to answer key strategy questions – should the focus solely be on the WHO elimination targets or did the limits of government action fall short or extend beyond these goals? Within these scenarios we examined the disease burden and financial impact of increased screening and treatment and the removal of treatment restrictions. Ultimately the decision was an aggressive combination of several interventions with a goal of eliminating HCV on an accelerated timeline.



**RESULTS** At the World Hepatitis Summit (WHS) in Sao Paolo in November 2017, Brazil announced its sustainable and financially viable plan to diagnose and treat all citizens infected with hepatitis C and eliminate the disease by 2030. Previously, due to budget limitations and high prices, treatment reimbursement was only prioritized to patients with advanced liver disease. Now, thanks to lower drug prices negotiated by the government, eligibility for reimbursement has been extended to all patients regardless of disease stage. The MOH is also launching initiatives to screen as many people as possible.

**LOOKING AHEAD** Brazil is becoming a leader in hepatitis eradication, similar to its role in the fight against HIV. The partnership between the MOH and CDAF continues in 2018 as the two will now turn their attention to hepatitis B elimination. The announcement at WHS inspired other nations to seek similar paths, including Brazil's neighbor, Colombia, which reached out to CDAF to reexamine its own strategy for eradication. Following the announcement at WHS, Colombia and CDAF began working on a strategy in 2018 to eliminate hepatitis B.

**TAKEAWAYS** Brazil follows the emerging trend that a country's disease burden is often lower than previously thought. Before any country can accurately determine the cost of screening or treatment, a thorough analysis of the disease burden and economic impact is needed. When the disease burden proves to be lower, like it did in Brazil, the path to elimination becomes more affordable and effective, but also requires a different strategy. Countries cannot determine solutions without understanding the problem and there won't be meaningful policy change without understanding the current state of the disease burden. Having this understanding allows us to find feasible and effective strategies that may otherwise have not been considered. The MOH's cooperation and collaboration with CDAF was also a valuable component towards meaningful action. This inclusive approach in quantifying the disease burden and developing appropriate action enables a clear path towards eliminating HCV.