

Updates in viral hepatitis in 2024 – summary of education, research and leadership activities of the ESCMID Study Group for Viral Hepatitis (ESGVH)

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In 2024, the global fight against viral hepatitis has made steady strides, marking yet another important year in the effort to eliminate this significant public health challenge. Through incremental progress in diagnosis, treatment and prevention, the foundation is being laid for more advanced interventions in the coming years.

Ongoing research into next-generation diagnostics and therapeutics seeks to expand management possibilities for hepatitis B virus (HBV) infection, with the current treatment pipeline ambitiously aiming to bring functional cure within sight in future years.¹

The optimization of direct-acting antiviral (DAA) regimens and the expansion of their indications contributed to making treatment of hepatitis C virus (HCV) infection more accessible and effective, with high rates of sustained virological cure. Standardized recommendations for post-treatment follow-up now facilitate evidence-based and risk-based liver monitoring following cure of HCV infection, to

timely identify any residual progression to hepatocellular carcinoma.² Decentralized care pathways may further help reach underserved populations, while simplified treatment protocols using pangenotypic DAAs have underscored the potential for broad-scale HCV management.

The recently approved therapeutic for hepatitis delta is increasingly being rolled out in more and more countries with real-world data for new patient populations becoming available to better inform clinical practice.^{3,4}

A more comprehensive understanding has been achieved regarding the tailoring of prevention efforts for viral hepatitis, encompassing risk reduction strategies,⁵ updated screening recommendations,⁶ and vaccination strategies.

Policies fostering universal timely HBV vaccination are part of the World Health Organization's Global health sector strategy on HIV, viral hepatitis and sexually-transmitted infections,⁷ and include the administration of an HBV vaccine birth dose, continued into a three-dose childhood vaccination schedule, to name only a few.

Highly-effective vaccines have long been available for the prevention of hepatitis A, and their implementation into national immunization programs is tailored to local epidemiological needs, which need to be well understood and addressed.

The precise positioning of hepatitis E virus (HEV) vaccination has not been fully established, largely due to its limited international availability and the need for further research to comprehensively describe the real worldwide incidence of the infection. Experts from the ESCMID Study Group for Viral Hepatitis (ESGVH) have recently published a position paper on HEV vaccination, formulating a set of impactful recommendations aimed at guiding the strategic implementation of HEV vaccination in populations where it is most needed.⁸

All these topics and much more have been the focus of a postgraduate educational course organized by the ESGVH in June 2024 Lund, Sweden, where a remarkable faculty gathered to present the most important recent updates in the field of viral hepatitis A, B, C, delta and E, while also exploring the degree of liver involvement in other infections beyond major hepatotropic viruses.

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The ESGVH is currently comprised of almost 200 members from 42 countries spanning all over the world, and is committed to advancing knowledge on viral hepatitis through research, education and scientific communication.

The ESGVH has been instrumental in supporting knowledge dissemination through educational webinars addressing prevention, diagnosis and treatment of viral hepatitis B and C in special patient populations. Furthermore, in 2024, the ESGVH has continued to contribute as organizing partner for national and international courses and conferences aimed at bridging gaps in diagnostics and care. Importantly, several of these educational events have been organized in collaboration with other renowned professional organizations from different countries, including the Society for Infectious Diseases and HIV/AIDS (Romania), the Society for Travel Medicine (Romania), the Association of Medical Microbiologists (India), and the Special Interest Group Hepatitis C of the American Association for the Study of Liver Diseases (USA). This helped connect researchers and clinicians with a wide geographic reach, further fostering cross-border collaboration in viral hepatitis research and education.

Despite important advances, significant challenges persist. Stigma and misinformation continue to deter individuals from seeking testing and treatment. Funding constraints risk slowing progress, particularly in high-burden regions. To address these barriers, ESGVH has been active in raising awareness, particularly during World Hepatitis Testing Week, and in advocating for equitable access to care.

This year's progress underscores the importance of incremental advances in achieving the ambitious goal of eliminating viral hepatitis as a public health threat by 2030. With continued collaboration among different stakeholders, researchers, and advocacy groups, the groundwork is being laid for a future where viral hepatitis is no longer a global health concern. Sustained efforts will be crucial to maintaining momentum and ensuring that all populations benefit from these developments.

Author contributions: OS contributed to conceptualization; writing – original draft; writing – review and editing. IH and

MM contributed to conceptualization; writing – review and editing. All authors read and approved the final version of the manuscript.

Conflicts of interest: All authors – none to declare.

Funding: None to declare.

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<https://doi.org/10.1016/j.cmi.2024.11.016>

Please cite this article as:

Săndulescu O, Hasanoglu İ, Matičič M. Updates in viral hepatitis in 2024 – summary of education, research and leadership activities of the ESCMID Study Group for Viral Hepatitis (ESGVH).

GERMS. 2024;14(4):320-321. doi: 10.18683/germs.2024.1442