

# Bulgarian group

**SCREENING AND  
PREVENTION**  
FOR VIRAL HEPATITIS  
AND HIV IN CEE

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*Common challenges  
joint solutions*



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# Analysis of the situation

## HIV

- Well organised registration, monitoring, therapeutic system , as well as screening of risky population groups;
- Mandatory HIV test before the marriage;
- Available medicines are modern one and, supplied via centralised tender from the MoH, available for the patients.

## Hepatitis infections

- Mandatory **HBV** immunisation available since 1992, leading to sharp decrease in the number of acute cases;
- For acute cases there is a well established registration system but no long term follow up;
- Blood testing is introduced since 85<sup>th</sup> so the most at risk is the generation between 39-65 years old.
- Little is known about the chronic infections, no registration system, no connection between the registration of patients with cirrhosis and liver carcinoma and their ethiology, old data;
- **HAV** and **HEV** - there are many HAV acute cases and HAV immunisation was entered in the vaccination program as voluntary. No information about the vaccinated;
- Mortality from liver diseases in Bulgaria is high;
- Lack of screening program for **HCV**;
- Before major surgical procedures some hospitals require HBV and HCV test;
- HIV, HBV and HCV test is mandatory for blood donors but some did not receive their results and if they are infected remain uninformed.

# Challenges

- 🔴 Screening is necessary but methodology is unclear;
- 🔴 Possibility to organise through GP or through Labor organisations;
- 🔴 How to reach the necessary population coverage;
- 🔴 Which population groups to include;
- 🔴 Apply for internationally funding programs;
- 🔴 Low rate of success of previous screening programs;
- 🔴 Incentives are necessary to apply for screening and vaccination programs;
- 🔴 Working group at the MoH still is not created.



# Action plan – what could be done

## MoH

- Organise working group
- Decide for screening
- Change regulation on dispensation;
- Transfusion centers to inform GPs for any virus carriage person;

## NHIF

- Include ALAT in mandatory prophylactic examinations;
- Introduce code for connection of the cirrhosis and its etiology

## Non-governmental organisations

- Apply for international funding
- Motivate people for screening

## Industry

- Cover the expenditures for testing and part of therapy

## Academy

- Analyze the possible ways for screening and its cost-effectiveness
- Support the screening and registration process.