

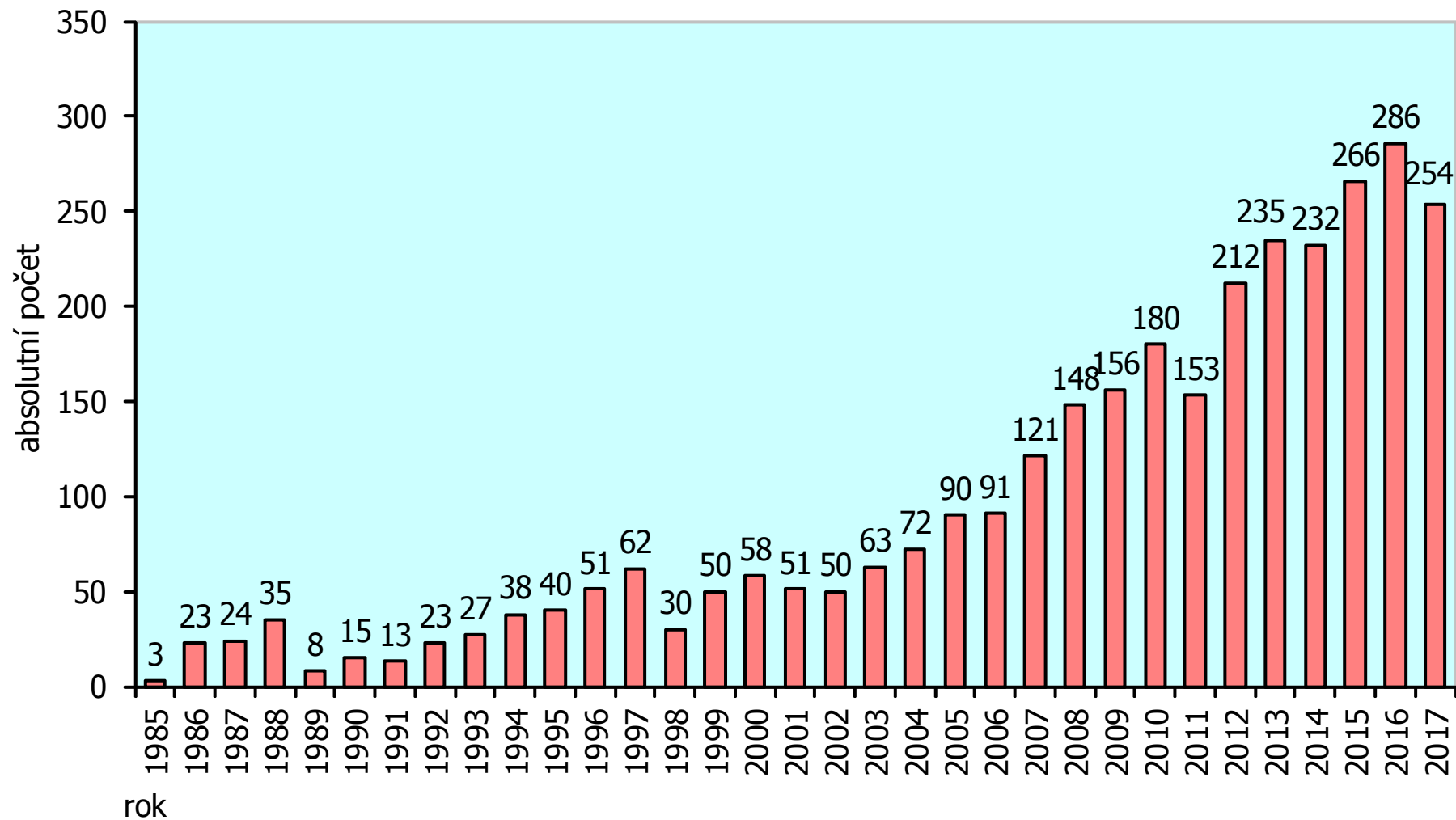
Czech Republic

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Number of new HIV positive cases in the Czech Republic in individual years

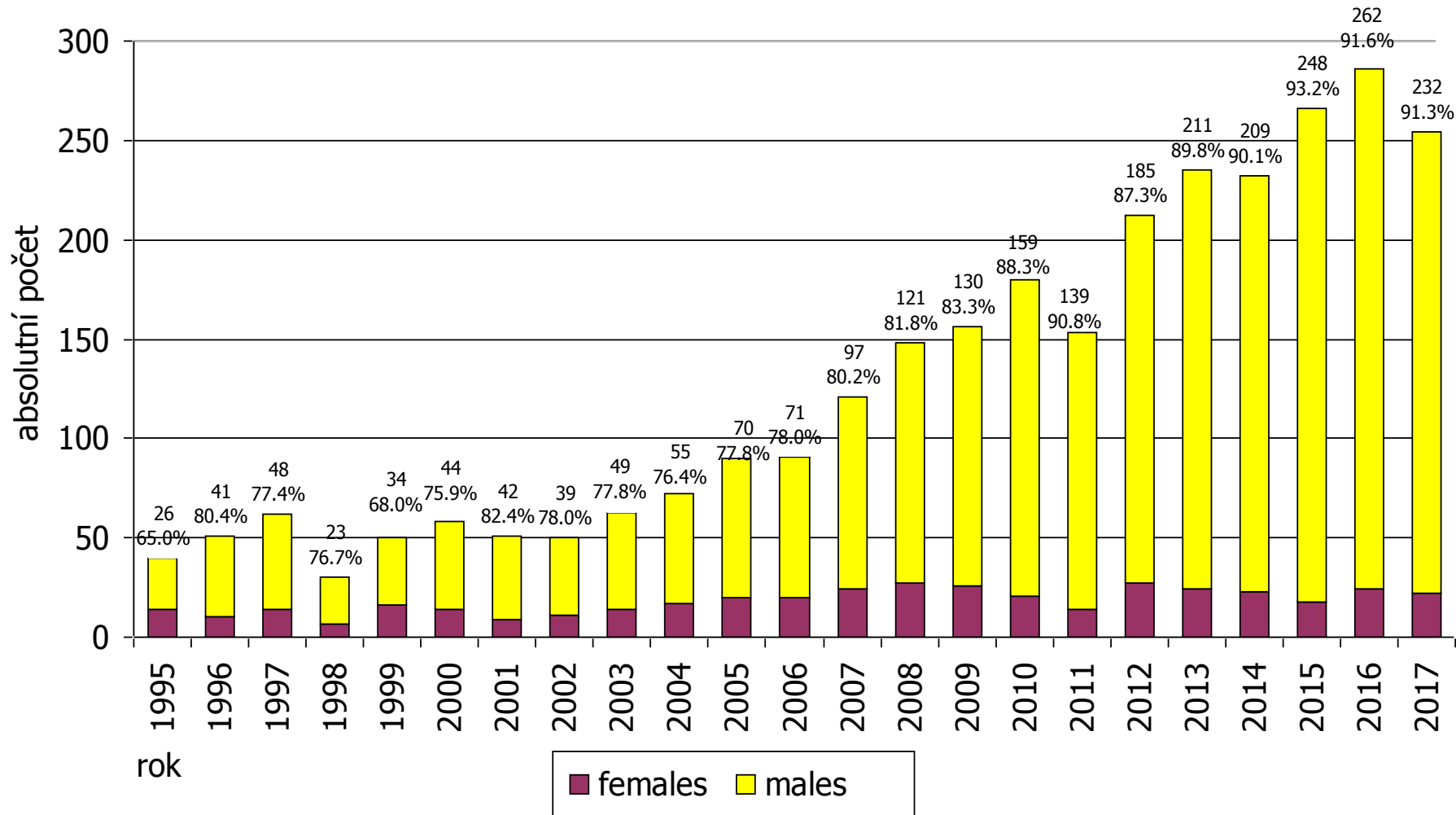


Graf 1

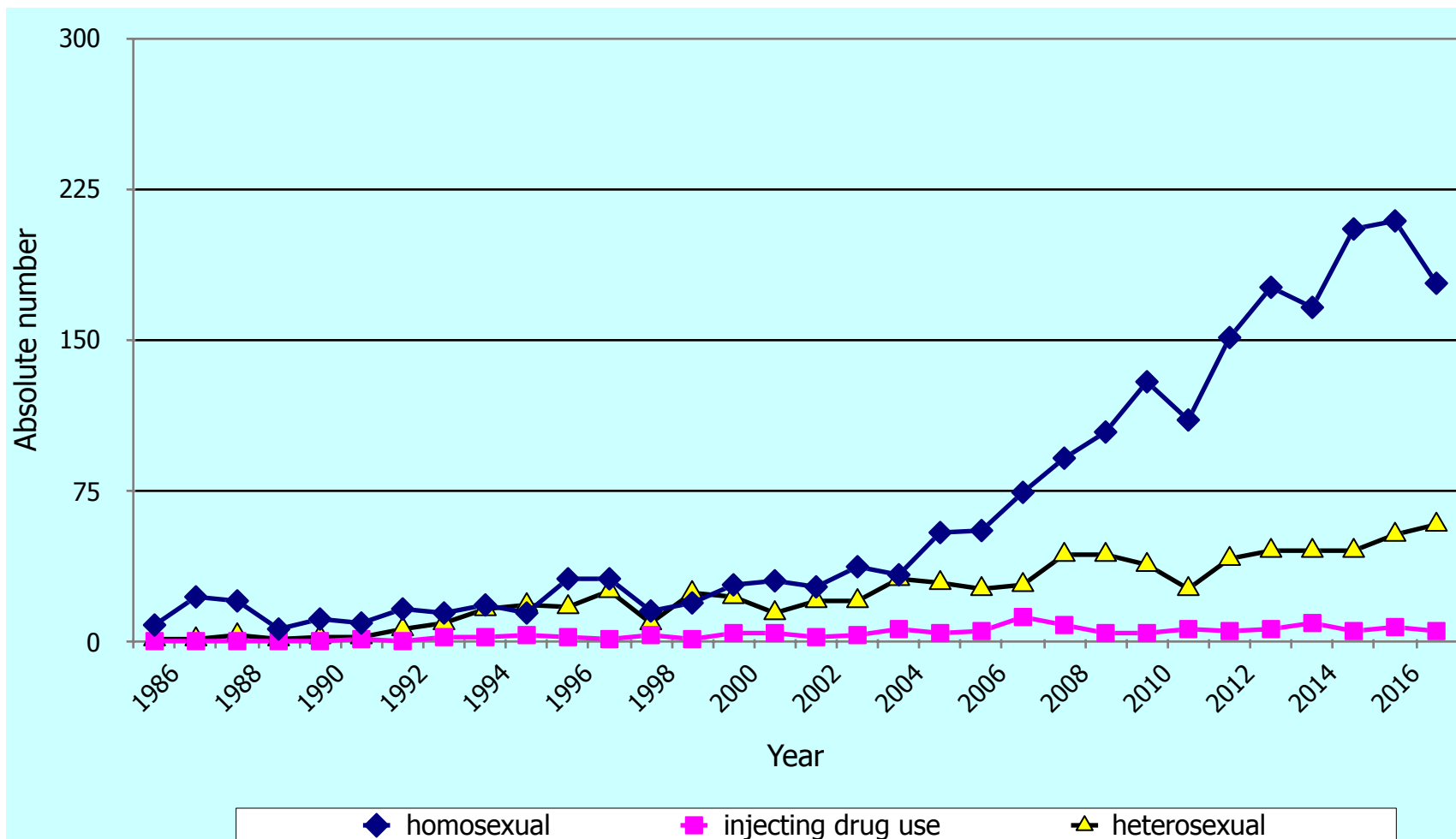
SEX DISTRIBUTION OF HIV+ CASES - PROPORTION OF MALES

(Czech citizens and residents)

Data for
1.1.1995 - 31.12.2017



SELECTED TRANSMISSION ROUTES OF HIV INFECTION IN THE CZECH REPUBLIC (y. 1986-2017)



1. Analysis of situation - HIV

- New National Plan for HIV/AIDS for 2018-2022
- Centralized obligatory system of confirmation, testing of viral load and HIV resistance testing in NRL for HIV/AIDS
- System of data collection and analysis (NRL)
- Testing and treatment is covered by health insurance
- New antiretrovirals are rapidly introduced
- Guidelines for PreP were issued (2018), PreP is available, paid by client

1. Analysis of situation - HBV

Successful mass vaccination programme since 2001: population under 29 y. is vaccinated.

Additional vaccination of risk groups (HCW, contact of HBV carriers, newborns of HBsAg+ve mothers, haemodialyzed pts., postexposure prophylaxis)

Treatment of HBV infection is fully available and covered by health insurance.

HBsAg screening of pregnant women (twice)

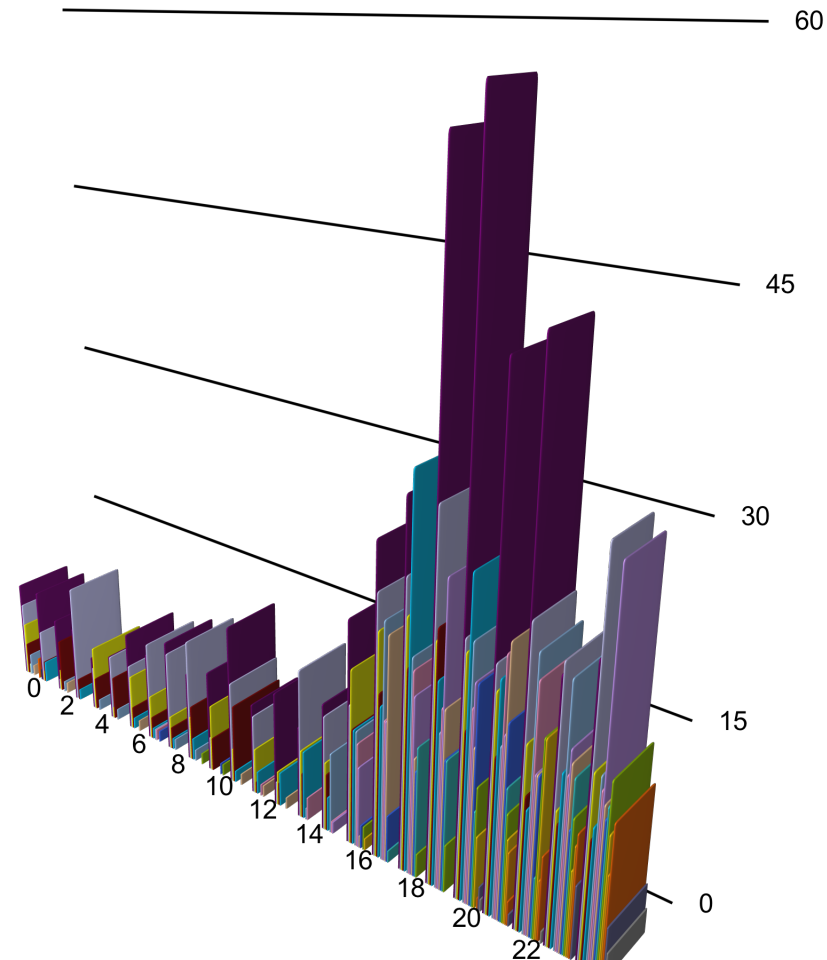
Incidence of acute VHB is 0,7

Prevalence of HBsAg 0.2%

Trend: decreasing

Hepatitis B, number of cases by the age 0-24 years, in the Czech Republic

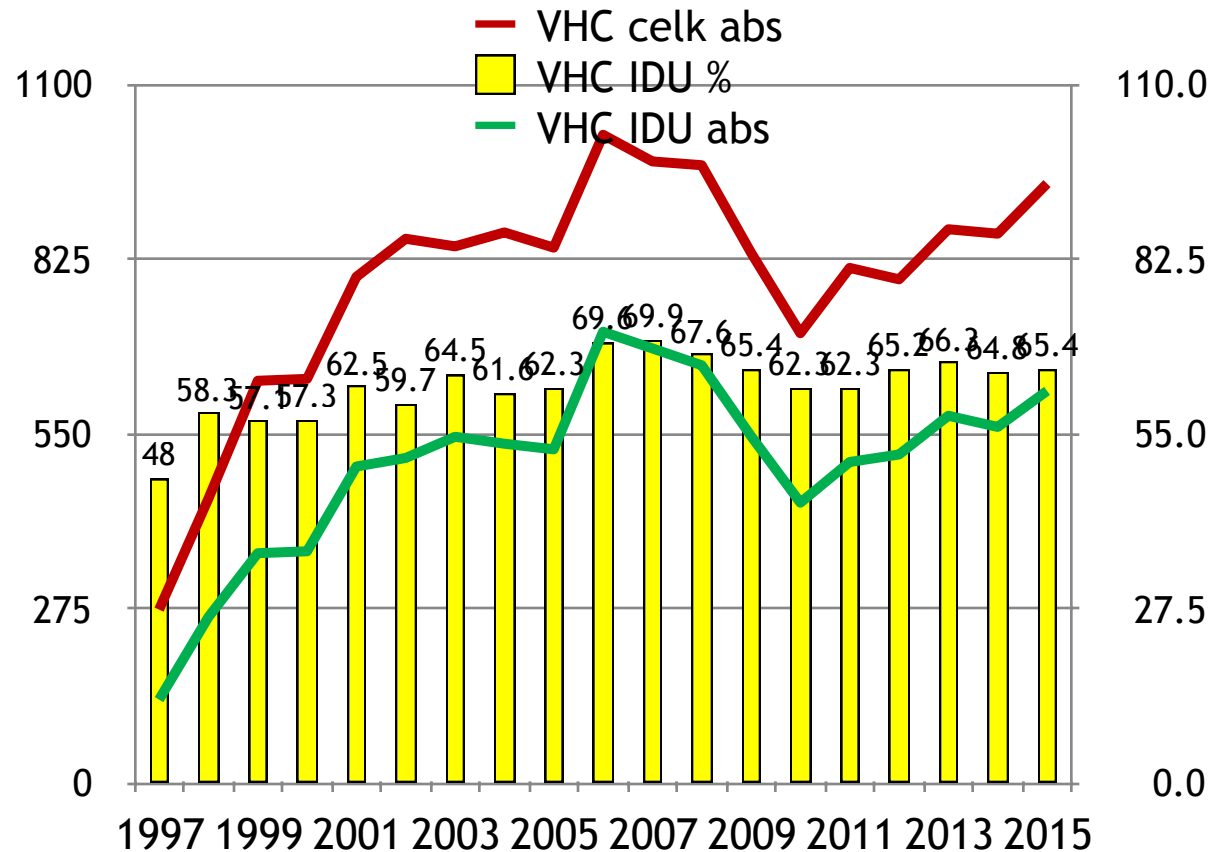
source: EPIDAT



1. Analysis of situation - HCV

Prevalence of HCV:
in the general population 0.5%
among IDU 30% - 80%
among HIV+ patients 11%

Hepatitis C in the Czech Republic, total,
in IDU and ratio of IDU in %



2. Challenges

- Increase of financial support for HIV prevention
- Decrease of numbers of late diagnosis of HIV (proportion of AIDS at first HIV diagnosis is 60-70% in AIDS stage)
- Unsuccessful health insurance support for HCV therapy (still large waiting list for DAA treatment)
- Lack of screening programme for HCV

3. Action plans

- Introduction of nucleic acid testing (NAT) and anti-HBc IgG testing into screening of blood donors (prevention of HBV transmission from blood donors with occult hepatitis B)
- Increase of awareness about HIV, HCV, HBV via media
- Improved access to testing of potential risk groups at endangering events (festivals, concerts atc.)

1. Analysis of the situation

Low incidence of HIV infection in IVDU might be caused by high financial support.

For IVDU in the Czech Republic 110 low threshold centers exist with HARM reduction programme.

In comparison with financing of HIV prevention, which is seriously underfunded.

Hepatitis C in the Czech Republic, total, in IDU and ratio of IDU in %

počet

VHC celk abs
VHC IDU abs

VHC IDU %

%

