Transition from millennium development goals to sustainable development goals and hepatitis

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Millennium development goals (MDGs), introduced 15 years ago, will come to an end in the last month of 2015, and will be succeeded by the sustainable development goals (SDGs), running until 2030. Health occupied a central role in the MDGs, with 8 out of 21 developmental targets health-focused, and health investment rose from \$11.6 billion in 2000 to \$33 billion in 2012.¹ In contrast, the SDGs are much broader in scope than the MDGs.

It is a sign of progress that viral hepatitis is included in the SDGs. The goal 3.3 of SDGs states that ‘by 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases’. Hepatitis is a global health problem. Approximately, 240 million people have chronic hepatitis B and 130–150 million people have chronic hepatitis C infections. Viral hepatitis is responsible for 1.4 million deaths per year and it is the seventh leading cause of deaths around the globe. The global hepatitis burden has remained underestimated for several years, and experts have only included mortality from acute hepatitis and have omitted the deaths from hepatitis B and C associated liver cancer and cirrhosis, which account for 80% of the viral hepatitis mortality burden. The underestimated burden persisted until the WHO Global burden of diseases’ figures were published in 2014.² Due to the lack of global attention, several countries are making few investments in the coordinated action needed to address hepatitis.

With its inclusion in the SDGs, more much-needed funding will be available for prevention and control of viral hepatitis. New HBV and HCV infections can be prevented by improvement in dealing with blood products, injections, surgical and dental treatments, and Hepatitis C can be treated with highly effective antiviral drugs. However, treatment cost is not yet at a widely affordable level and although the price of certain drugs has been

reduced for selected lower and middle-income countries, it is a big problem to treat large populations of patients with HCV infection. It is a positive sign that the WHO has included certain new HCV drugs in the list of essential medicines, but now, there needs to be a plan to make accessible affordable treatments of viral hepatitis.

If the proper attention is not given to the control of hepatitis, experts have forecast that 20 million deaths will be occurring by Hepatitis B only from 2015 to 2030.³ There is a strong need to develop a global strategy for hepatitis eradication.⁴ The control of hepatitis pandemics requires political will, financial investment and support from pharmaceutical, medical and civil organizations around the globe.⁴

Conflict of interest

The author does not have any conflict of interest in the publication of this article.

Notes on contributor

Y. Waheed solely contributed to the study.

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References

- 1 Dieleman JL, Graves C, Johnson E, Templin T, Birger M, Hamavid H, Freeman M, Leach-Kemon K, Singh L, Haakenstad A, Murray CJ. Sources and focus of health development assistance, 1990–2014. *JAMA*. 2015;313:2359–2368.
- 2 Naghavi M, Wang H, Lozano R, Davis A, Liang X, Zhou M, *et al*. Global, regional and national age-sex specific all cause and cause specific mortality for 240 causes of death, 1990–2013: a systematic analysis for the global burden of diseases study 2013. *Lancet*. 2015;383:117–171.
- 3 Global health sector strategy on viral hepatitis, 2016–2021. World Health Organization. Available from http://www.who.int/hiv/draft-hep-strategy-2016-2021_en.pdf (accessed 2015 May 23).
- 4 Waheed Y. Hepatitis C eradication: a long way to go. *World J Gastroenterol*. 2015;21:12510–12512.

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