



HEPATITIS DELTA

THE HIDDEN EPIDEMIC AFFECTING
PEOPLE LIVING WITH HEPATITIS B



A PROGRAM OF THE HEPATITIS B FOUNDATION

LEARNING OBJECTIVES

TOPICS TO BE COVERED

What is hepatitis delta?

Who is affected?

Prevention & transmission

Symptoms

Disease progression

Testing

Treatment & Clinical Trials

Finding doctors & info for providers

Educating your community

Challenges

Resources





What is Hepatitis D?



Hepatitis D (hepatitis delta or HDV) is the most severe form of viral hepatitis, which can only infect people who are also living with hepatitis B.

- **It promotes more rapid progression to liver disease and liver cancer.**
- **Treatments for hepatitis B are not effective for hepatitis D, and coinfecting patients require altered management plans.**
- **There is low patient and provider awareness, leaving many undiagnosed.**



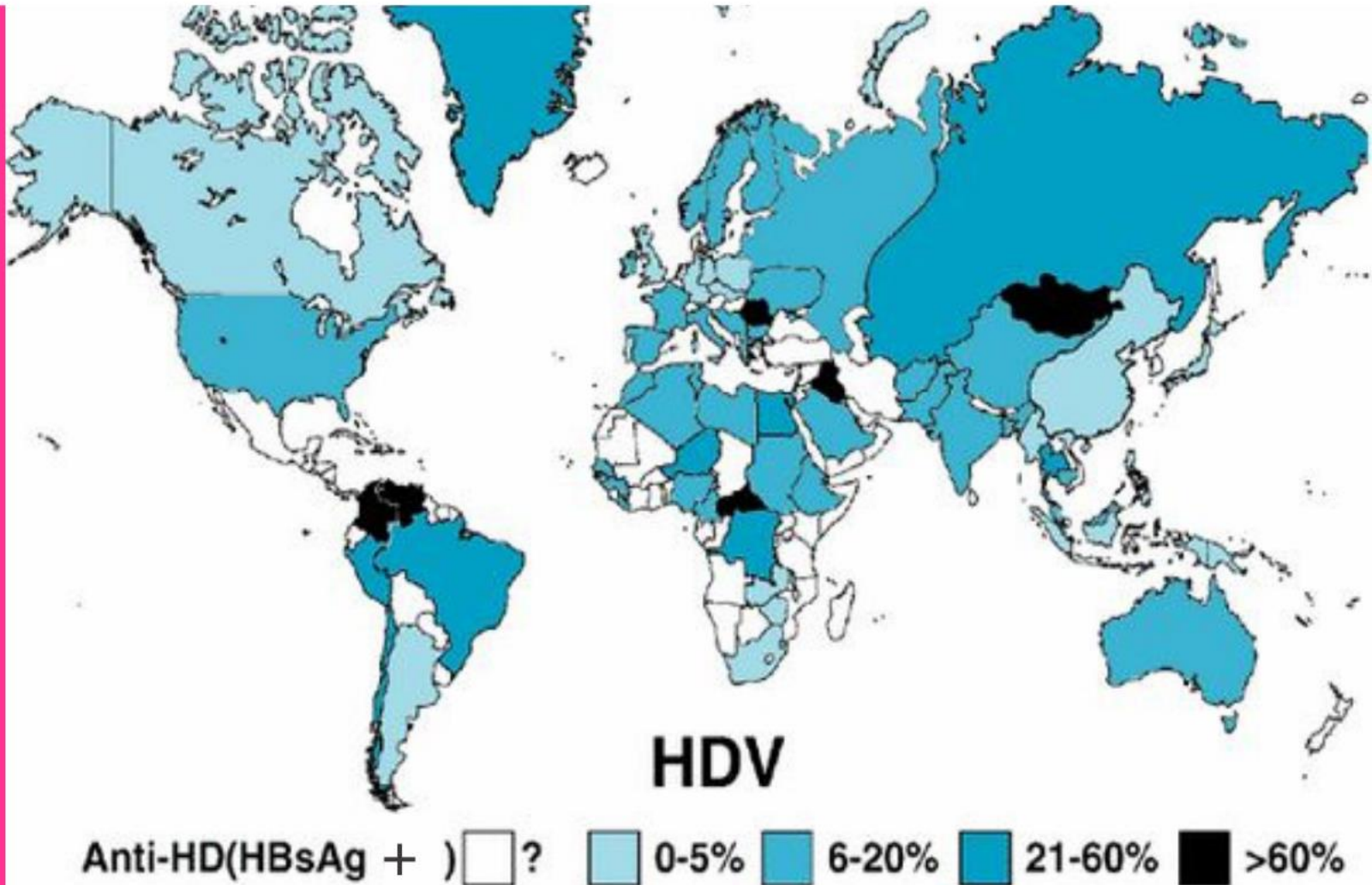
GLOBAL PREVALENCE OF HEPATITIS B AND D COINFECTION

5-10%

Of people with hepatitis B are estimated to also be living with hepatitis D

REGIONS OF HIGHEST PREVALENCE

- MONGOLIA
- EASTERN MEDITERRANEAN
- WEST AND CENTRAL AFRICA
- AMAZONIAN RIVER BASIN
- MIDDLE EAST
- SOUTH AND EAST ASIA





RISK GROUPS

HIGHEST RISK IS FOR PEOPLE WHO
ALREADY HAVE HEPATITIS B

**AASLD RECOMMENDS
TESTING PEOPLE LIVING
WITH HEPATITIS B WHO MAY
BE HIGH-RISK:**



TABLE 7. HBsAg-Positive Persons at High Risk of HDV Infection Who Should Be Screened

- Persons born in regions with reported high HDV endemicity*
 - Africa (West Africa, horn of Africa)
 - Asia (Central and Northern Asia, Vietnam, Mongolia, Pakistan, Japan, Taiwan)
 - Pacific Islands (Kiribati, Nauru)
 - Middle East (all countries)
 - Eastern Europe (Eastern Mediterranean regions, Turkey)
 - South America (Amazonian basin)
 - Other (Greenland)
- Persons who have ever injected drugs
- Men who have sex with men
- Individuals infected with HCV or HIV
- Persons with multiple sexual partners or any history of sexually transmitted disease
- Individuals with elevated ALT or AST with low or undetectable HBV DNA

*This list is incomplete, because many countries do not report HDV rates.

Prevention

For people who are not already infected, the hepatitis B vaccine can also protect against hepatitis D.



**3 POKES =
A LIFETIME OF PROTECTION!**

Family members and sexual partners of people with hepatitis B and D should be vaccinated



3 | Types of Infections

1

SUPERINFECTION

When someone who already has a chronic hepatitis B infection becomes infected with hepatitis D

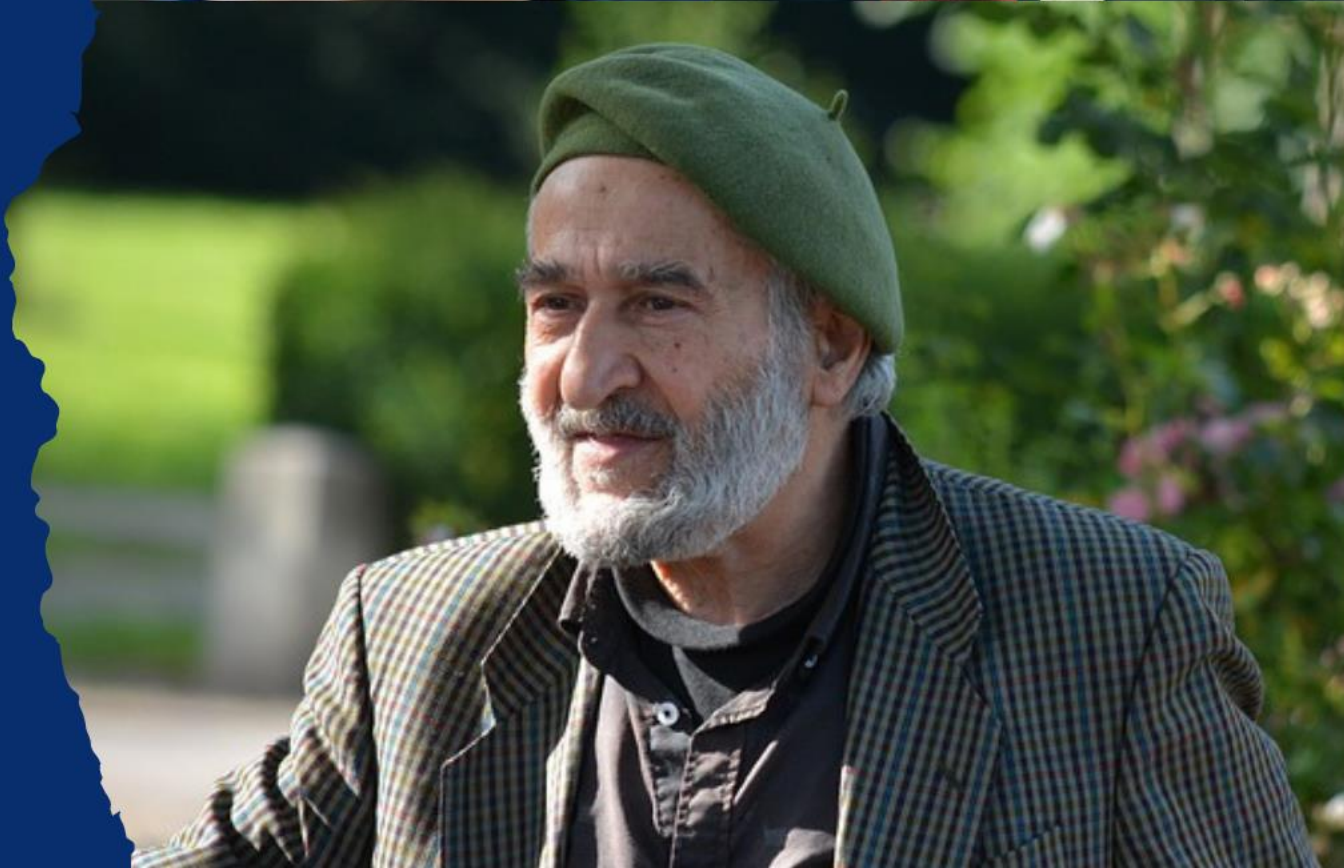
More likely to develop into a chronic coinfection

2

COINFECTION

When someone becomes infected with hepatitis B and D at the same time

More likely to clear both infections



3 | Transmission (Similar to hepatitis B)

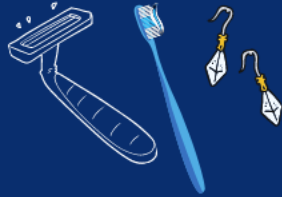
Exposure to blood or bodily fluids of an infected person

Blood

Direct blood to blood contact

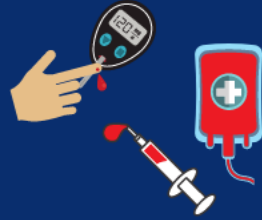


Mother to child during birth



Household contact

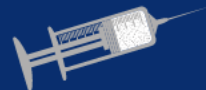
Sharing hygiene equipment (razors, toothbrushes, earrings etc.)



Unsterile healthcare practices



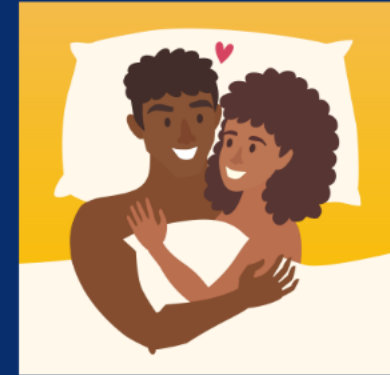
Tattoos, piercings, barbers, scarification, circumcision practices



Sharing needles

Sex

Direct contact with sexual fluids



Sexual transmission

There is a risk during any type of sexual contact



Possible Symptoms

Feeling tired



Joint pain



Abdominal pain



Yellow skin
or eyes



Vomiting



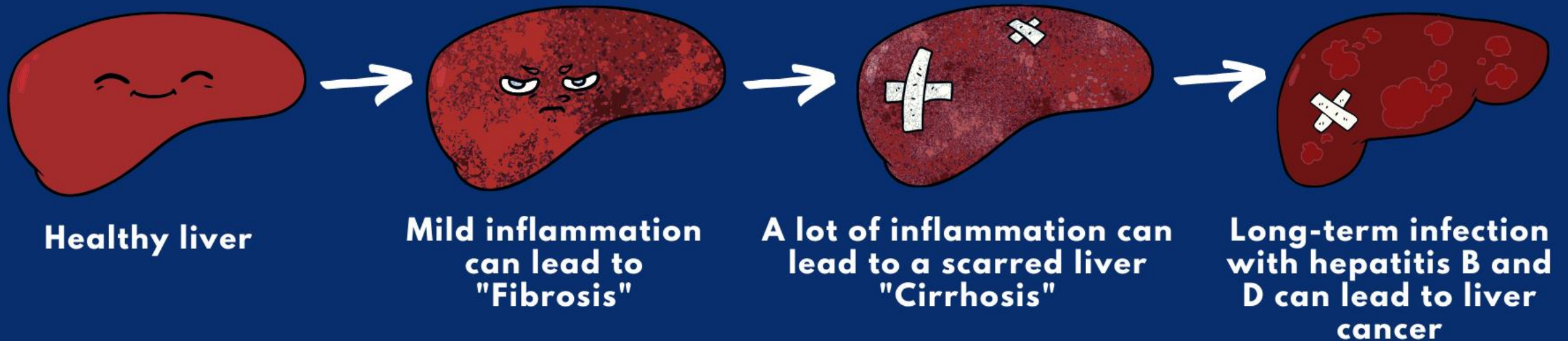
Dark urine or
clay colored stool



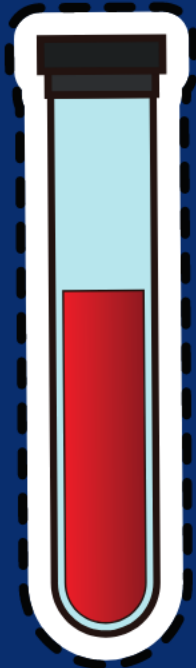
**Most people
do not have any
symptoms!**

3 | Outcomes of Coinfection

- During coinfection, hepatitis D suppresses the hepatitis B virus and becomes the main source of liver damage
- 70% of chronic HDV cases will progress to cirrhosis or liver cancer in 10 years without intervention



Testing



Testing for hepatitis D is a simple blood test. The American Association for the Study of Liver Diseases (AASLD) recommends testing all people with hepatitis B who are at high risk for hepatitis D.

Testing in the US is available through:

- The Centers for Disease Control and Prevention (CDC)
- Quest Diagnostics
- ARUP Laboratories

For people already diagnosed with chronic hepatitis B in the United States, there is an opportunity for free testing through Quest Diagnostics:

- Contact Hepatitis Delta Connect Manager, Beatrice Zovich, beatrice.zovich@hepb.org



3 | TREATMENT

Hepcludex

First medication approved for treatment of hepatitis delta

Approved for prescription in Europe in July 2020

More approvals hopefully coming in 2023

Pegylated interferon injections

Are effective in controlling hepatitis D in 20-30% of patients

Usually administered through weekly injections for ~1 year

Antivirals for hepatitis B are not effective at controlling hepatitis D

Phase 3 clinical trials are ongoing for two new treatments

LONAFARNIB

LAMBDA PEG-INF





FINDING CLINICAL TRIALS



CLINICAL
TRIALS

**HDV CLINICAL TRIALS ARE
REGULARLY HAPPENING
AROUND THE WORLD.**

**USE OUR CLINICAL TRIALS
FINDER TOOL TO LOCATE ONE
NEAR YOU!**



[HTTPS://WWW.HEPB.ORG/RESEARCH-AND-PROGRAMS/HEPDELTACONNECT/CLINICAL-TRIALS/](https://www.hepb.org/research-and-programs/hepdeltaconnect/clinical-trials/)

[CLICK HERE FOR MORE INFO](#)



LOCATING DOCTORS



**FINDING A DOCTOR
EXPERIENCED IN MANAGING
COINFECTION IS IMPORTANT!**

**USE OUR LIVER SPECIALIST
DIRECTORY**



WWW.HEPB.ORG/PHYSICIANDIRECTORY

[CLICK HERE FOR MORE INFO](#)

3 | WHY TEST FOR HEPATITIS D?



Patients will need
altered management
and treatment



There are phase 3 clinical
trial opportunities across
the U.S. and world



More coinfections identified =
more awareness, research and
treatments!

We can save lives!



Talk to your community about their risk and encourage testing.

Remember:

- For people already living with hepatitis B, start a conversation about hepatitis D, which is a rare but serious virus for which they may be at risk.
- Explain that coinfections need to be managed and treated differently - so testing could save their life!
- Testing is simple and may be free through Quest. Encourage people to talk about testing with their doctors!





Current **HDV** Challenges



- **Little HDV testing**
- **Low awareness among patients and providers**
- **Limited advocacy**
- **Low engagement**
- **Additional stigma and discrimination**





HEPATITIS DELTA CONNECT

WWW.HEPDCONNECT.ORG

Goal: Promote international awareness and testing and provide support for people living with hepatitis delta

Website



Easy-to-understand disease information

- How to find testing
- Clinical trials
- Liver specialist directory
- Drug Watch

Social Media Education

 @hepdconnect

-  • News
-  • Engaging infographics
-  • Clinical trial updates

Phone and Email Support



Personalized education, support and connection to resources

- Via email at connect@hepdconnect.org
- Via phone at 215-489-4900 

Blog

Bimonthly blog posts on topical issues

www.hepb.org/blog/HDV



Newsletter

Monthly email updates to 1300 contacts

Fact Sheets



Printable fact sheets for patients and providers

Available in 5 languages

- English, Mongolian, Romanian, Russian, Spanish

Webinars

Focused on provider education & patient outreach

- Epidemiology, testing, virus information



SUPPORT



MAILING ADDRESS

Hepatitis B Foundation
3805 Old Easton Road
Doylestown, PA 18902



EMAIL ADDRESS

beatrice.zovich@hepb.org
connect@hepdconnect.org



PHONE NUMBER

215-489-4900
(hepatitis B and D questions &
support hotline)



 | **THANK YOU!**

**PLEASE FEEL FREE TO TAKE OUR
KNOWLEDGE ASSESSMENT QUIZ AT
[HTTPS://WWW.SURVEYMONKEY.COM](https://www.surveymonkey.com/r/delta101quiz)
[/R/DELTA101QUIZ](https://www.surveymonkey.com/r/delta101quiz)**



Thank You