



Dear Members and Supporters,

As we approach the end of the year, we want to express our heartfelt gratitude for your unwavering support in 2025. Together, we have taken further steps to raise awareness across Switzerland toward the elimination of viral hepatitis—bringing us closer to a world free from this preventable disease. A special thank to everyone who actively contributed to our symposium on December 8 in Bern. A report of the findings and discussion you find in the attached Newsletter.

Yet, our work is far from over. In 2026, we will continue to face challenges, but also new opportunities to expand our impact. With your continued support, we can further strengthen prevention, improve access to care, and advocate for policies that save lives.

Thank you for standing with us in this vital mission. We look forward to working with you again in 2026!

Warmest wishes for the festive season and a happy New Year!

Philip Bruggmann, President
Nathalie Brunner, Managing Director

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Achieving Hepatitis C Micro-Elimination in Opioid Agonist Therapy (OAT) – Key Insights from the Swiss Hepatitis Symposium 2025

The Swiss Hepatitis Symposium 2025, held in Bern, focused on a pressing question: **How can we achieve the micro-elimination of viral hepatitis C among people in Opioid Agonist Therapy (OAT), especially in decentralised settings?** The symposium emphasised the importance of integrated care models, innovative diagnostic methods, and collaboration among all stakeholders to address this challenge.

A key consensus from the symposium was that **hepatitis diagnostics and treatment must be integrated directly into OAT settings**, as is already the case in addiction medicine centers. However, the challenge remains in extending this approach to **decentralised settings**, such as primary care practices, to achieve elimination goals. International approaches presented at the symposium included **Point-of-Care (POC) antibody tests**, which enable quick, straightforward on-site testing, and Dried Blood Spot (DBS) testing, which provides a simple sample-collection and shipping method, particularly for patients who prefer to avoid venipuncture. Another essential component is **reflex testing**, where a positive screening test automatically triggers follow-up tests, such as HCV RNA testing. Additionally, **POC RNA testing** can provide immediate confirmation of an active HCV infection, accelerating the start of treatment.

The symposium also highlighted the need to **strengthen clinicians' competence** through targeted training and support, ensuring they feel confident in managing hepatitis care. Future strategies discussed included integrating **peer support and patient navigators** into clinical practice, with training programs for peer counsellors and clear role definitions. To improve treatment adherence, systems such as apps, SMS reminders, and regular check-ins by peer counsellors were presented. Strengthening post-treatment follow-up was also emphasised to minimise reinfection risks and ensure long-term care. Societal change is equally crucial: **Stigma, discrimination, criminalisation, and violence against people who use substances must be actively dismantled** to improve access to care.

A focus of the symposium was data from the **SAMMSU Cohort** (Swiss Association for the Medical Management in Substance Users), which covers a nationwide population of over 1,500 people in OAT. The findings provided valuable insights into the current state of hepatitis care and underscored urgent needs. The data on hepatitis B and D were particularly revealing: **30% of the cohort lacked adequate protection against hepatitis B**, an alarming figure given the population's risk factors. While **80% of the population had undergone HBs antigen testing**, only **1.3% tested positive**. More concerning was that **only 50% of hepatitis B-positive clients were subsequently tested for hepatitis D**, highlighting the need for **clear testing guidelines** to ensure comprehensive and consistent diagnostics. Without such guidelines, critical diagnoses may be missed, and affected individuals may not receive necessary treatment.

Two presentations addressed **hepatitis care in decentralised settings, such as primary care outside specialised institutions**. These discussions revealed **significant gaps in care**, often due to competing priorities in daily practice. Primary care providers frequently face **time constraints, limited resources, and a lack of clear structures** for systematically implementing hepatitis diagnostics and treatment in their practices. These challenges were further explored in the **World Café discussions**, where it became evident that primary care providers need **clear directives and testing guidelines**.

Potential solutions include **involving cantonal health authorities** to establish uniform standards and processes in OAT and **empowering nursing staff** to take a central role in patient motivation, education, regular testing, and empowerment. Often, the first point of contact, nurses can significantly improve care through targeted training and clear protocols.

The insights from the **SAMMSU Cohort** and **World Café discussions** demonstrate that **sustainable improvement in hepatitis care in Switzerland requires clear guidelines, organisational support, and a strengthened role for nursing staff**. Only then can we ensure that all affected individuals—regardless of their care setting—have access to necessary diagnostics and treatment.

Micro-elimination of viral hepatitis among people in OAT is achievable, but it demands a **collaborative effort** involving integrated care models, simplified diagnostics, rapid treatment initiation, and strong political and societal support. By working together—clinicians, peer counsellors, policymakers, and all stakeholders—we can turn this goal into reality.

Information and Advisory Services for Everyone

Hepatitis Schweiz is committed to supporting all individuals affected by viral hepatitis, including healthcare professionals, patients, their families, and the general public. Our comprehensive services are designed to provide information, guidance, and support to everyone who needs it:

- **hepCare.ch:** Our platform provides practical tools, guidelines, and training materials to help primary care physicians treat hepatitis C patients in their own practices.
- **Expert Consultations:** We offer personalised consultations and exchange opportunities with our network of experts.
- **For the General Public, Affected Individuals, and Families:** Information and Awareness, Peer-Support

• SAVE THE DATE

30 November 2026, Swiss Hepatitis Symposium

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Please send us your remarks, questions and inputs you like to share with the network to info@hepatitis-schweiz.ch.