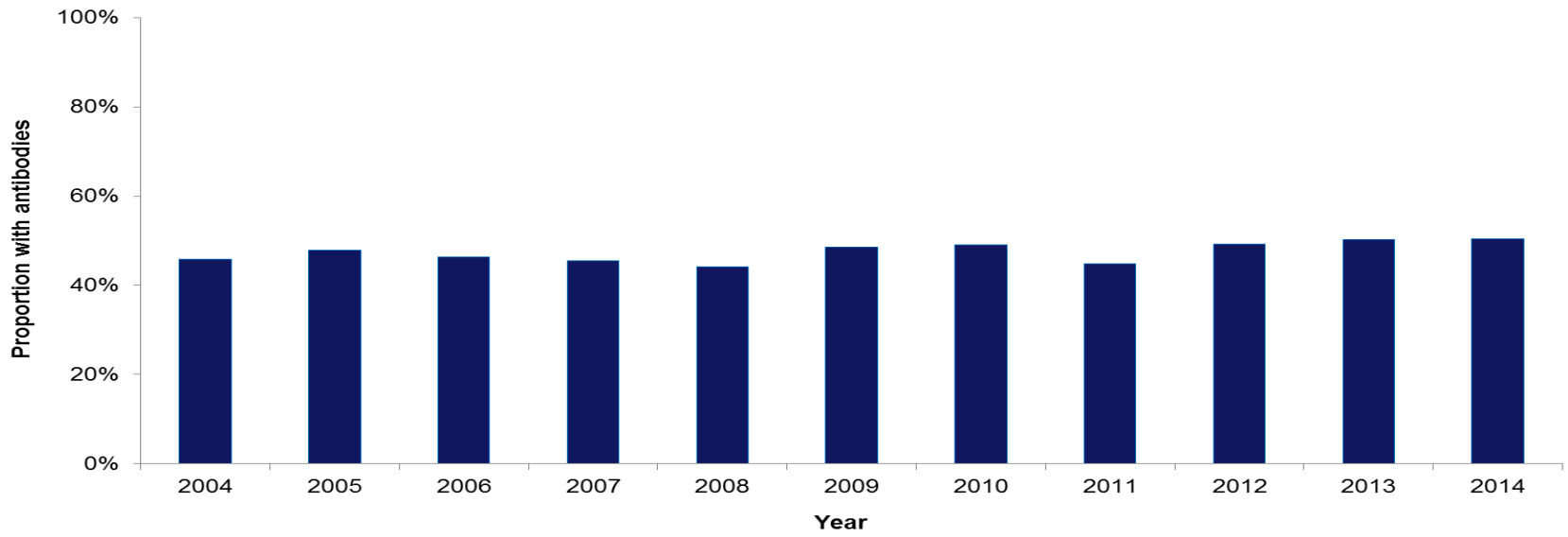
Public Health England

Hepatitis C in the UK 2015 report

Public Health England

Figure 1. Trend in anti-HCV prevalence* among people who inject drugs in England: 2004 to 2014

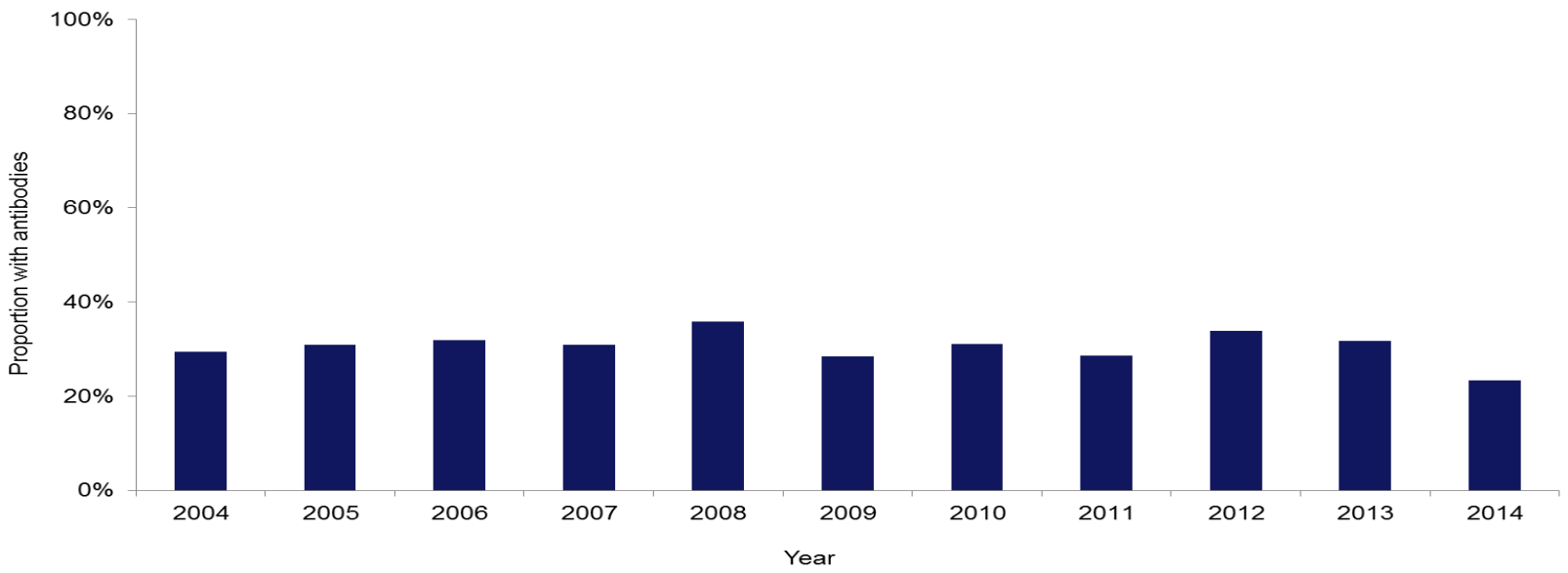


Data source: Unlinked Anonymous Monitoring Survey of people who inject drugs in contact with specialist services.[5]

* During 2009 to 2011 there was a phased change in the sample collected in the survey from an oral fluid to dried blood spot (DBS). The sensitivity of the anti-HCV tests on these two sample types is different. The sensitivity of the oral fluid test for anti-HCV is approximately 92%,[38] that on DBS samples is close to 100%. Data presented here have been adjusted for the sensitivity of the oral fluid test.

Public Health England

Figure 2. Trend in anti-HCV prevalence* among people who inject drugs in Northern Ireland: 2004 to 2014



Data source: Unlinked Anonymous Monitoring Survey of people who inject drugs in contact with specialist services. [5]

* During 2009 to 2011 there was a phased change in the sample collected in the survey from an oral fluid to dried blood spot (DBS). The sensitivity of the anti-HCV tests on these two sample types is different. The sensitivity of the oral fluid test for anti-HCV is approximately 92%,[38] that on DBS samples is close to 100%. Data presented here have been adjusted for the sensitivity of the oral fluid test.

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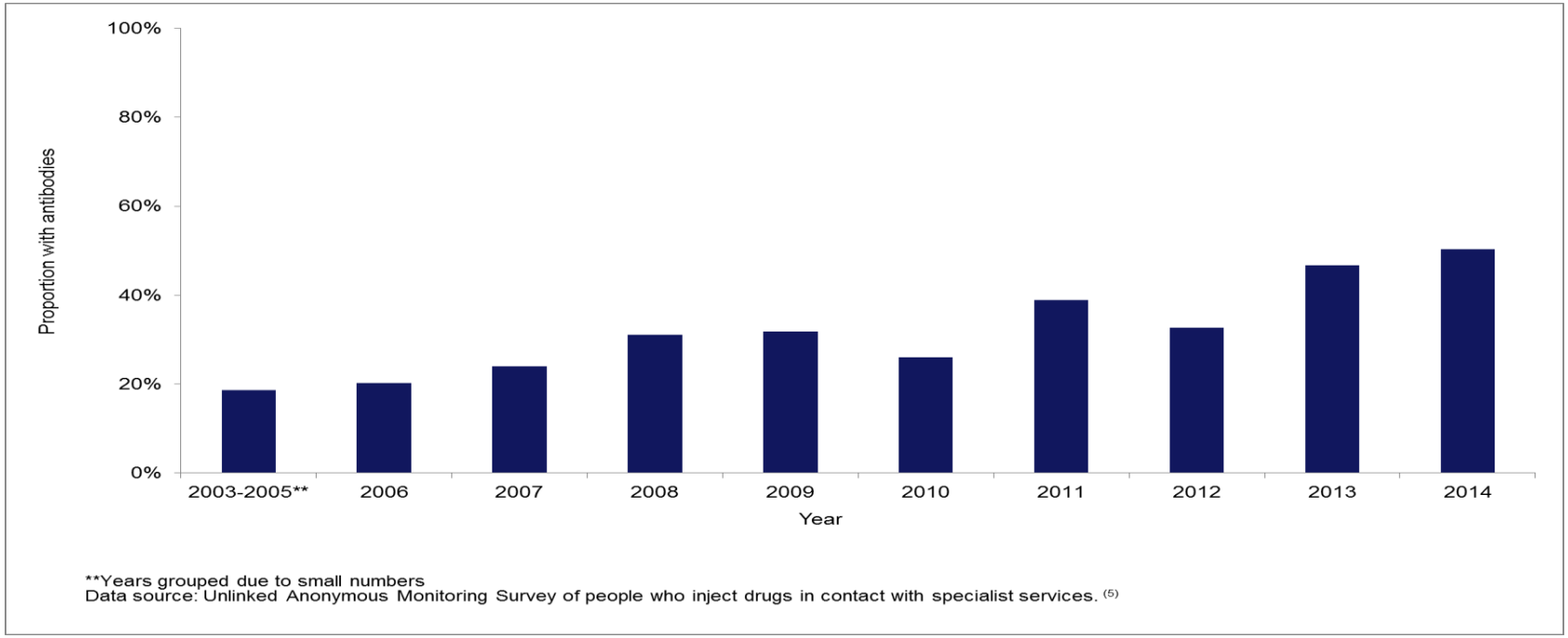
Figure 3. Trend in anti-HCV prevalence* among people who inject drugs in Wales: 2003 to 2014



* During 2009 to 2011 there was a phased change in the sample collected in the survey from an oral fluid to dried blood spot (DBS). The sensitivity of the anti-HCV tests on these two sample types is different. The sensitivity of the oral fluid test for anti-HCV is approximately 92%[38] that on DBS samples is close to 100%. Data presented here have been adjusted for the sensitivity of the oral fluid test.

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Figure 4. Proportion of PWID, surveyed at services providing injection equipment across mainland Scotland in 2008-09, 2010, 2011-12 and 2013-14 who were found to be hepatitis C antibody positive

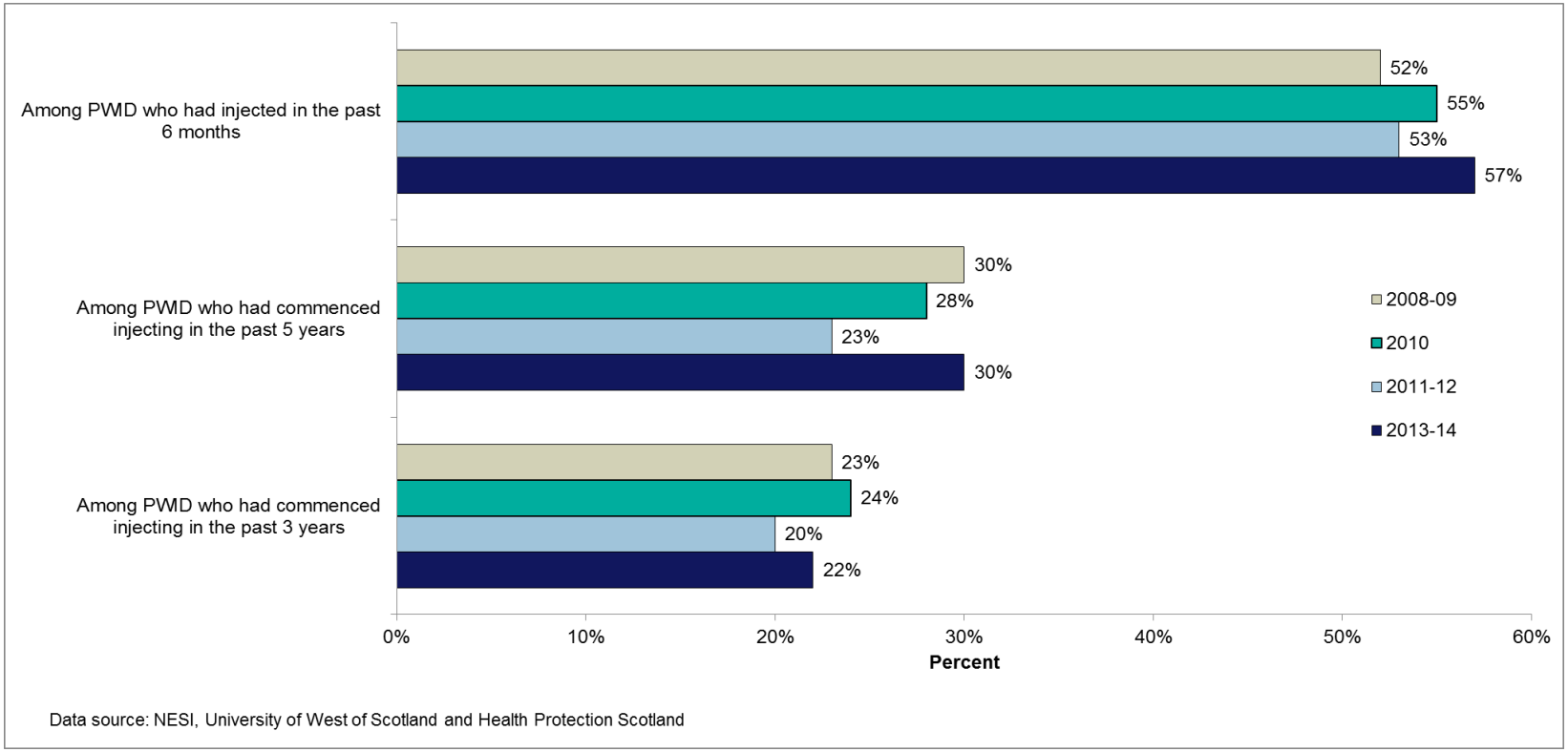

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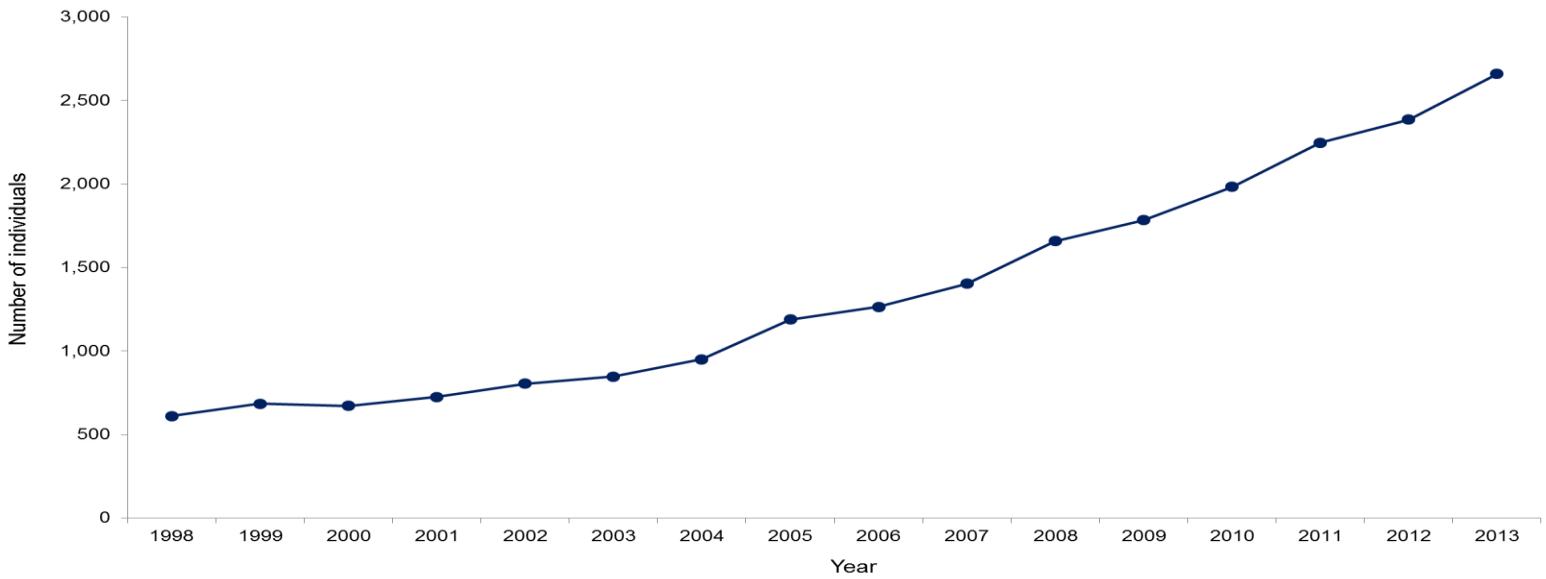
Figure 5. Annual number of individuals in England[1], Scotland[2], Wales[1] and Northern Ireland[3] hospitalised with HCV-related ESLD* or HCV-related HCC: 1998 to 2013



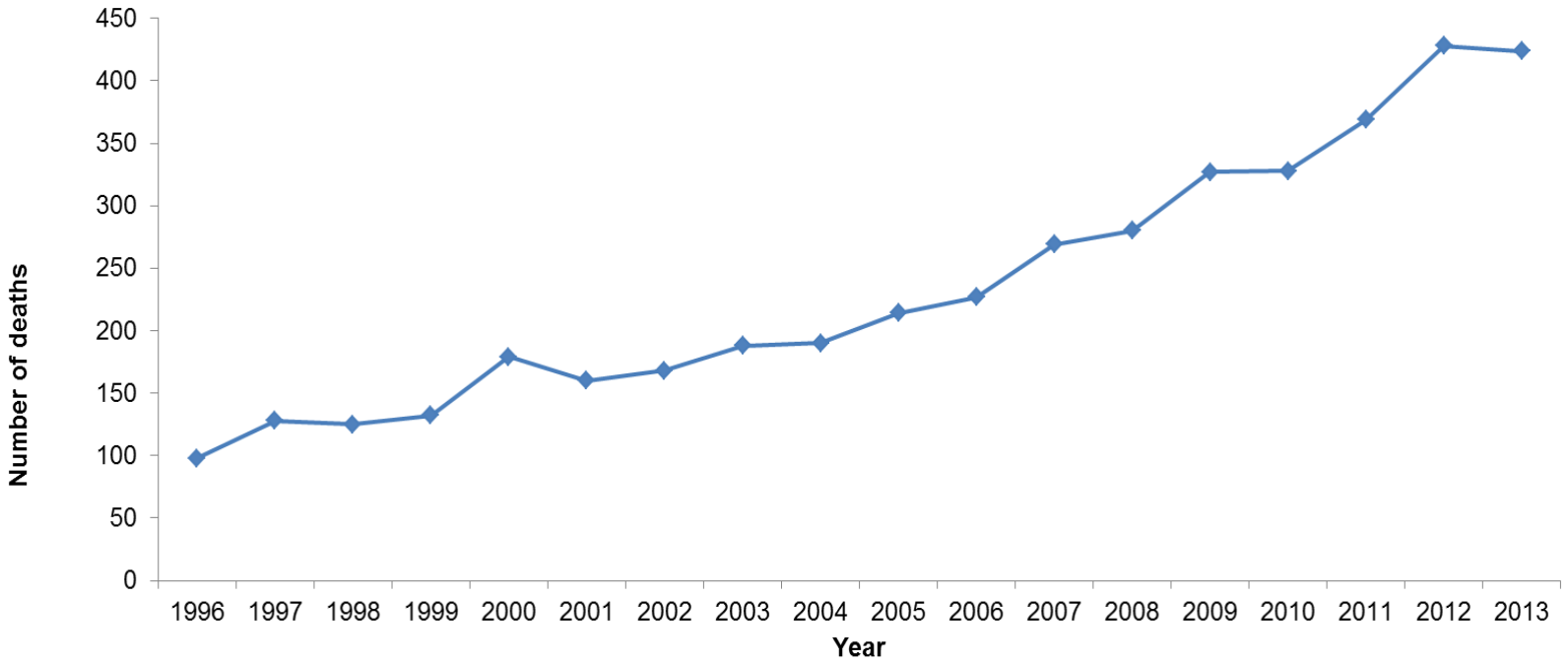
* Defined by codes or text entries for ascites, bleeding oesophageal varices, hepato-renal syndrome , hepatic encephalopathy or hepatic failure.

[1]Refers to individuals in England and Wales hospitalised with HCV-related ESLD or HCV-related HCC
[2]Refers to individuals in Scotland diagnosed with hepatitis C and admitted to hospital for the first-time with either ESLD or HCC.
3Refers to individuals in Northern Ireland who were admitted in HSC hospitals with HCV-related ESLD or HCV-related HCC. Data available from 2006 only.

Data source:Hospital Episode Statistics (HES), The NHS Information Centre for Health and Social Care, England;
Patient Episode Database for Wales (PEDW). NHS Wales Informatics Service,
Health Protection Scotland, in association with the Information Services Division.
Hospital Inpatient System, Northern Ireland

Public Health England

Figure 6. Deaths from ESLD* or HCC in those with hepatitis C mentioned on the death certificate in the UK: 1996 to 2013

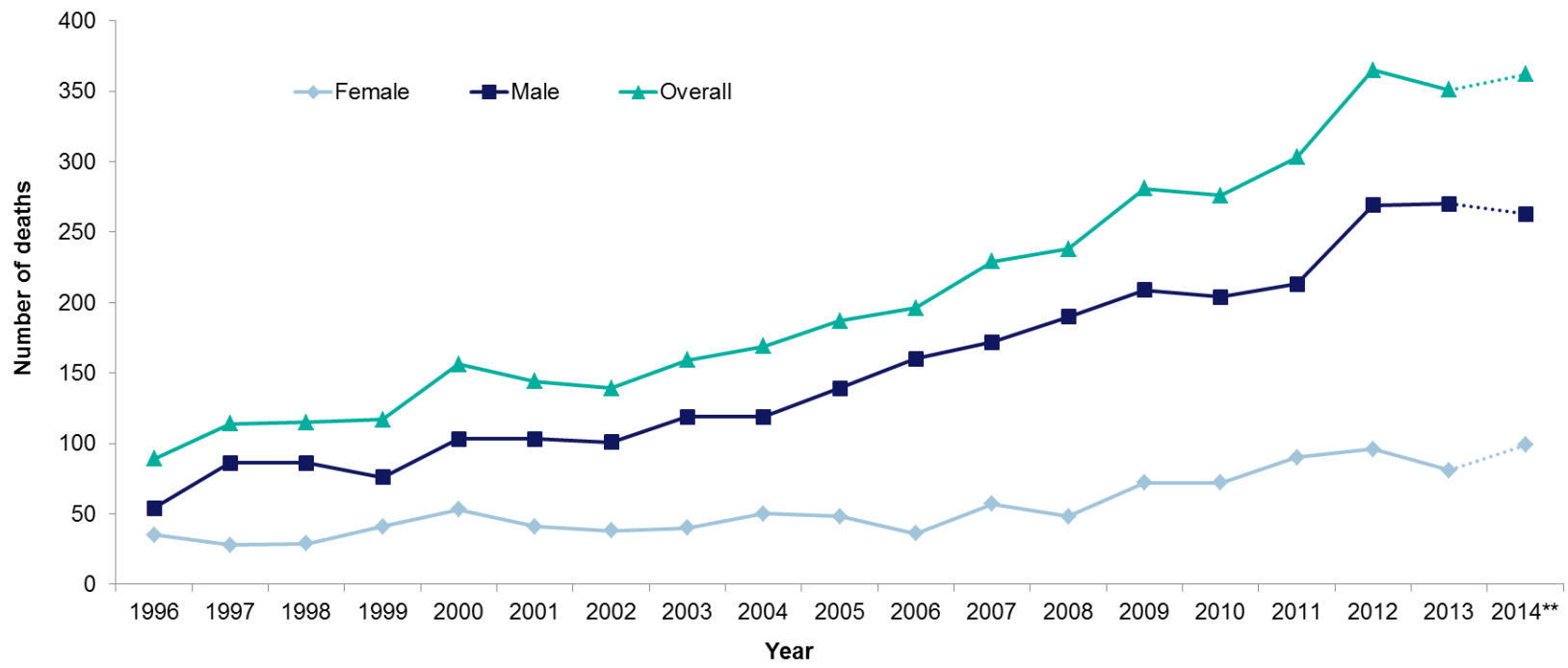


* Defined by codes or text entries for ascites, bleeding oesophageal varices, hepato-renal syndrome , hepatic encephalopathy or hepatic failure.

Data source: Office for National Statistics (England & Wales); Health Protection Scotland, in association with the Information Services Division; Northern Ireland Statistics and Research Agency

Public Health England

Figure 7. Deaths from ESLD* or HCC in those with HCV mentioned on their death certificate in England: 1996 to 2014**



* Defined by codes or text entries for ascites, bleeding oesophageal varices, hepato-renal syndrome, hepatic encephalopathy or hepatic failure.
**2014 data is provisional
Data source: Office for National Statistics

Public Health England

Map 1. Number of deaths from ESLD* or HCC in those with HCV mentioned on their death certificate by PHE Centre 2008 to 2014*** (per 100,000 population)**

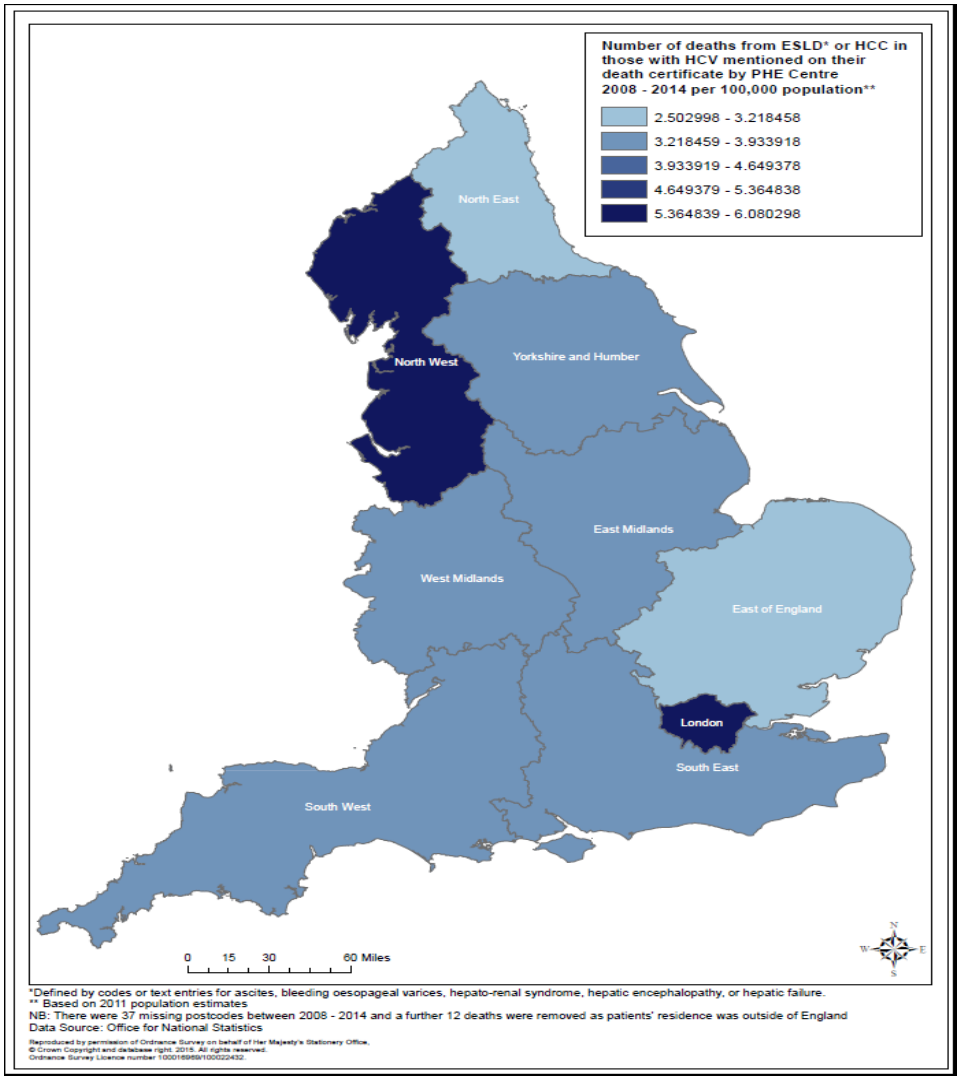


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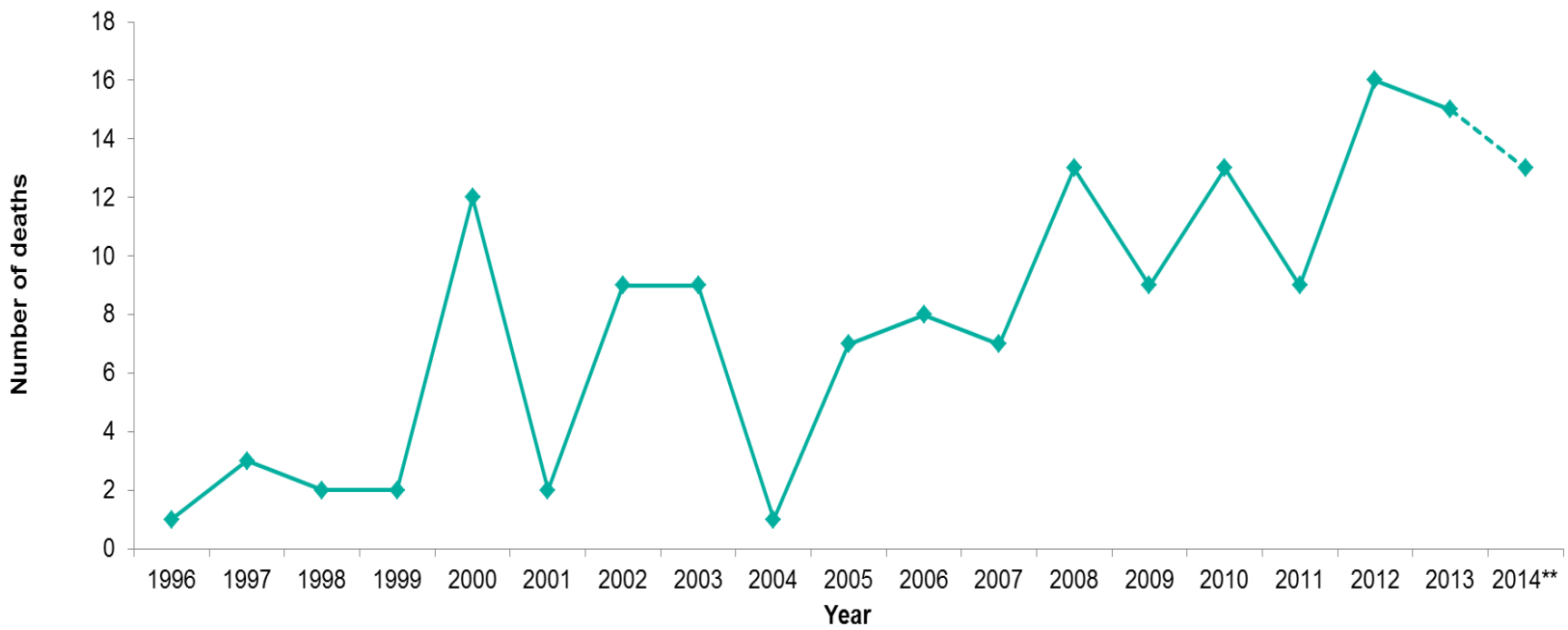
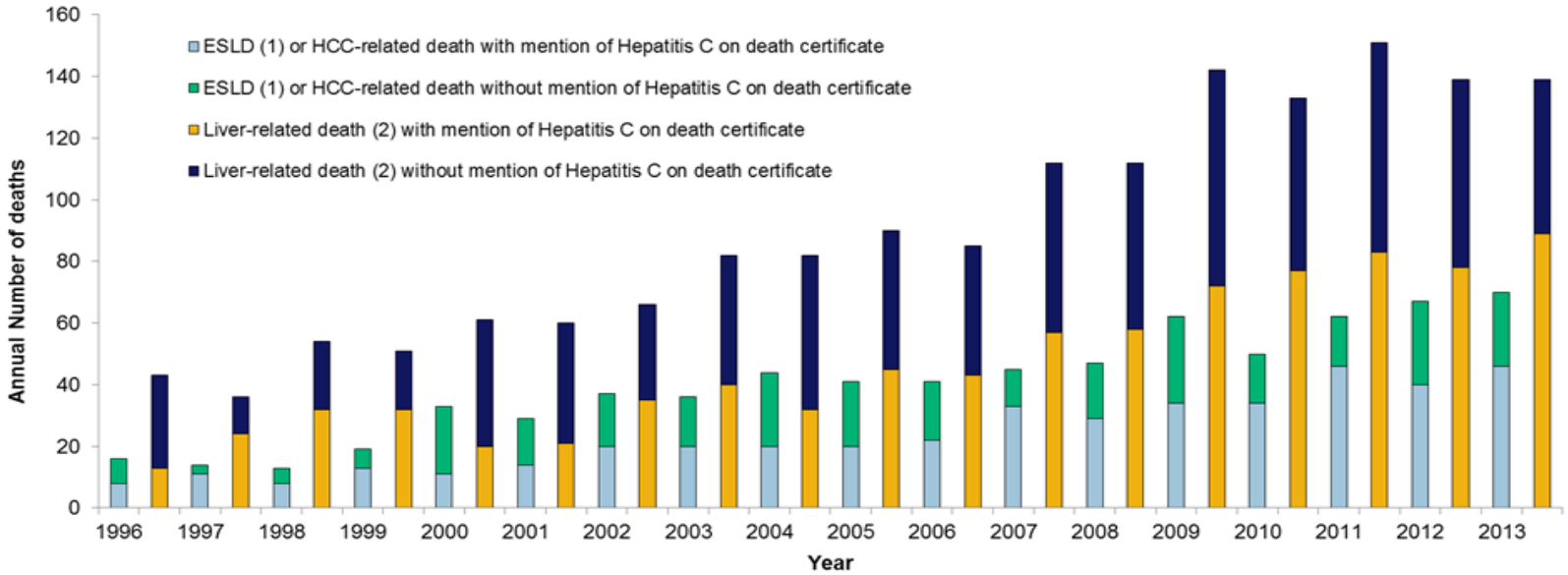
Figure 8. Deaths from ESLD*, or HCC, in those with HCV mentioned on their death certificate in Wales: 1996 to 2014**



* Defined by codes or text entries for ascites, bleeding oesophageal varices, hepato-renal syndrome , hepatic encephalopathy or hepatic failure.
**2014 data is provisional
Data source: Office for National Statistics

Public Health England

Figure 9. Annual number of deaths related to liver disease and end-stage liver disease (ESLD)/hepatocellular carcinoma (HCC) among persons diagnosed with hepatitis C (antibody positive or RNA positive) in Scotland, during 1996 to 2013.

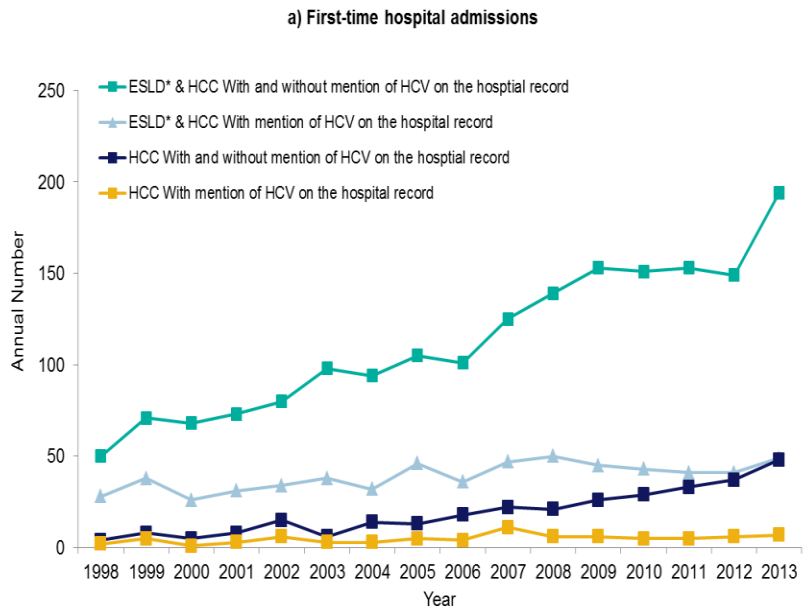


[1] Deaths were defined as related to ESLD if the underlying/contributing cause of death was either ascites, hepatic encephalopathy, hepatic failure, hepato-renal syndrome, or bleeding oesophageal varices.
[2] Deaths were defined as related to liver disease if the underlying cause of death was either (a) viral hepatitis, (b) liver cancer, (c) alcoholic liver disease or (d) non-alcoholic liver disease, or the contributing cause of death was either (b), (c) or (d).

Data Source: Health Protection Scotland

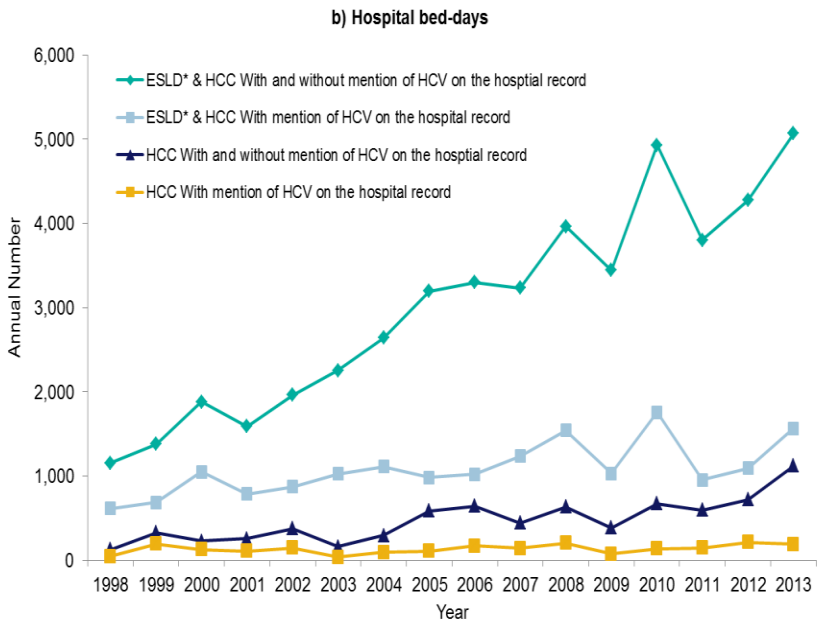
Public Health England

Figure 10. Annual number of: (a) first-time hospital admissions and (b) hospital bed-days associated with ESLD and HCC among persons diagnosed with hepatitis C (antibody positive or RNA positive) in Scotland, during 1998 to 2013.



*Hospitalisations were defined as associated with ESLD if the primary/secondary diganosis was either ascites, hepatic encephalopathy, hepatic failure, Hepato-renal syndrom or bleeding oesophageal varices.

Data source: Health Protection Scotland, in association with Information Services Division

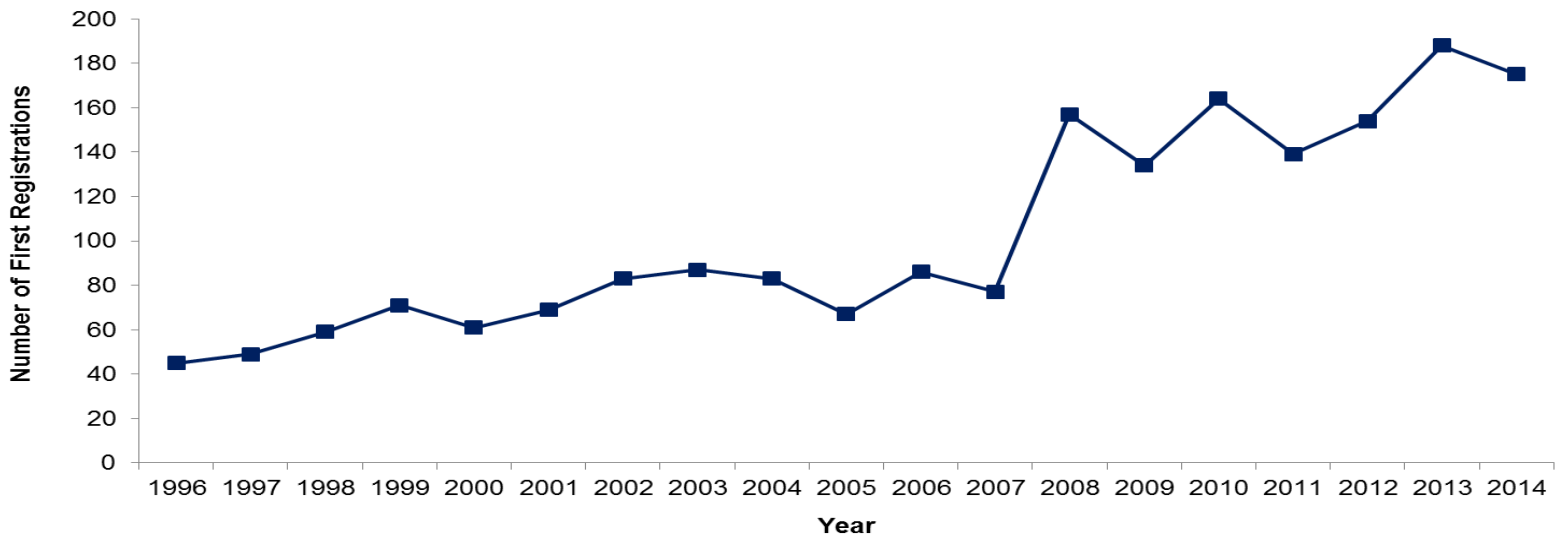


*Hospitalisations were defined as associated with ESLD if the primary/secondary diganosis was either ascites, hepatic encephalopathy, hepatic failure, Hepato-renal syndrom or bleeding oesophageal varices.

Data source: Health Protection Scotland, in association with Information Services Division

Public Health England

Figure 11. Number of first registrations* for a liver transplant in the UK where post-hepatitis C cirrhosis was given as the primary, secondary or tertiary indication for transplant: 1996 to 2014**

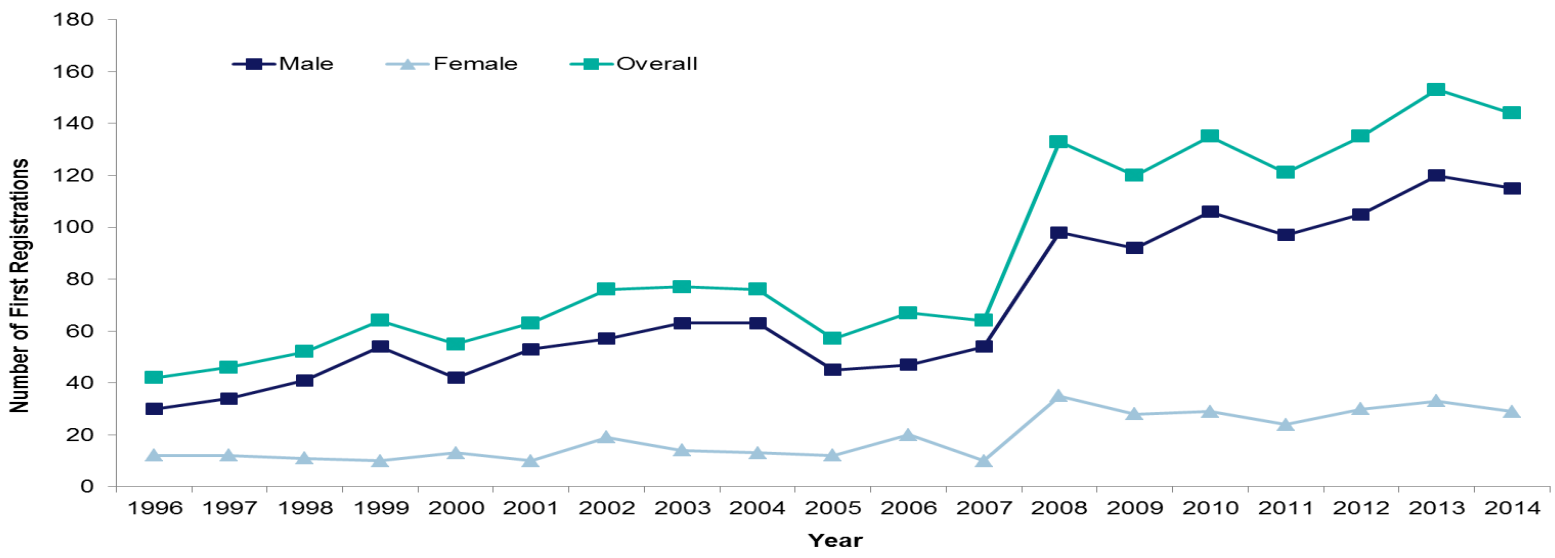


**These figures are based on registry data as at 9 April 2015
Data source: NHS Blood and Transplant UK Transplant Registry

*New national registration criteria for selecting adult patients for elective liver transplantation were introduced in September 2007[40]

Public Health England

Figure 12. Number of first registrations* for a liver transplant in England where post-hepatitis C cirrhosis was given as either the primary, secondary or tertiary indication for transplant: 1996 to 2014**

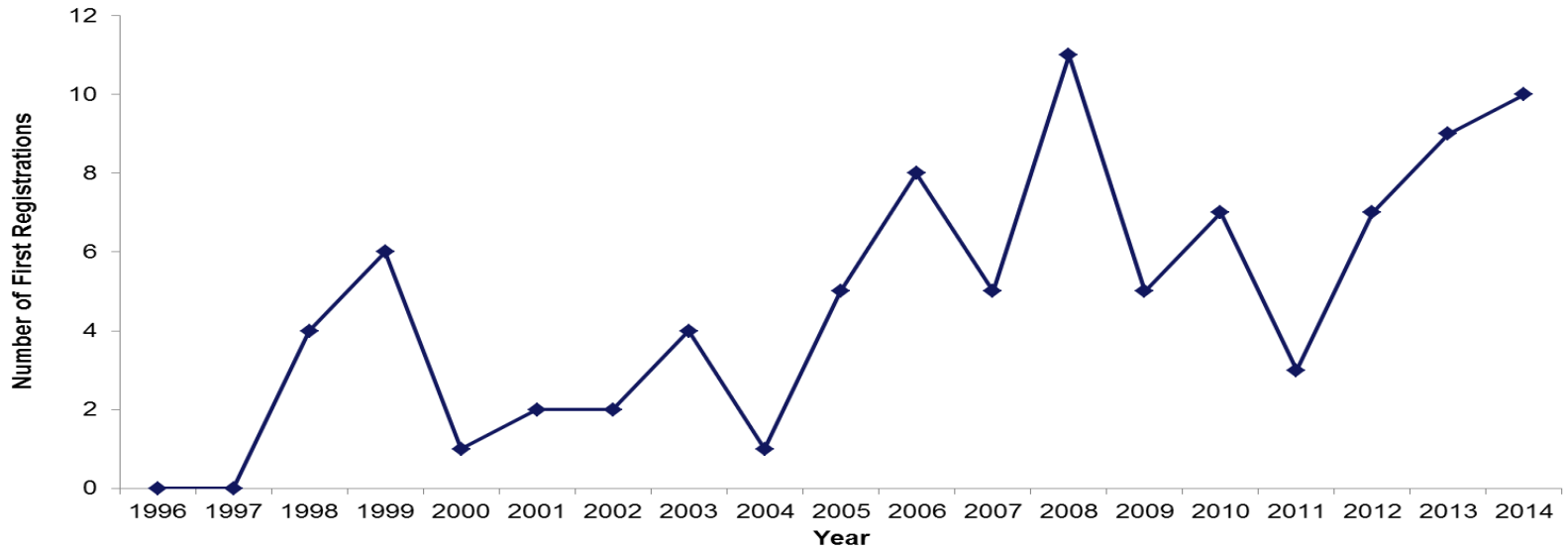


**These figures are based on registry data as at 9 April 2015
Data source: NHS Blood and Transplant UK Transplant Registry

*New national registration criteria for selecting adult patients for elective liver transplantation were introduced in September 2007[40]

Public Health England

Figure 13. Number of first registrations* for a liver transplant in Northern Ireland and Wales where post-hepatitis C cirrhosis was given as the primary, secondary or tertiary indication for transplant: 1996 to 2014**

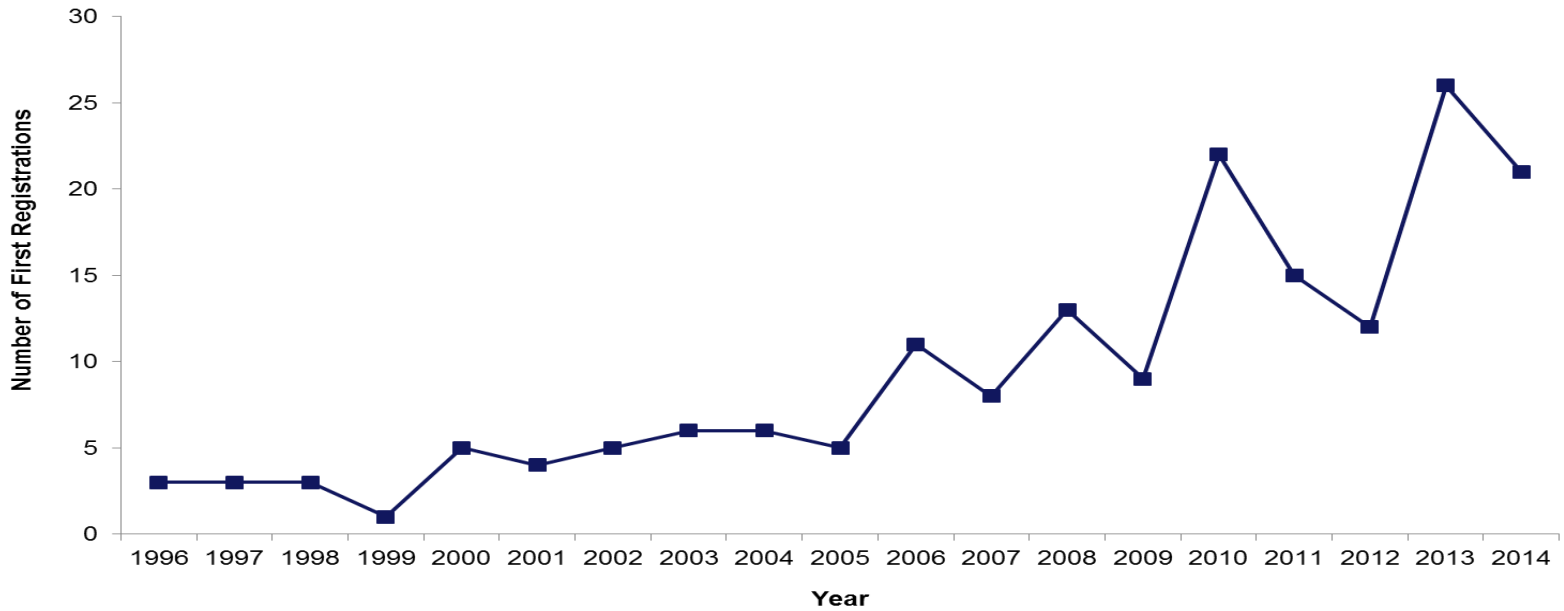


**These figures are based on registry data as at 9 April 2015
Data source: NHS Blood and Transplant UK Transplant Registry

*New national registration criteria for selecting adult patients for elective liver transplantation were introduced in September 2007[40]

Public Health England

Figure 14. Number of first registrations* for a liver transplant in Scotland where post-hepatitis C cirrhosis was given as the primary, secondary or tertiary indication for transplant:1996 to 2014**



**These figures are based on registry data as at 9 April 2015
Data source: NHS Blood and Transplant UK Transplant Registry

*New national registration criteria for selecting adult patients for elective liver transplantation were introduced in September 2007[40]

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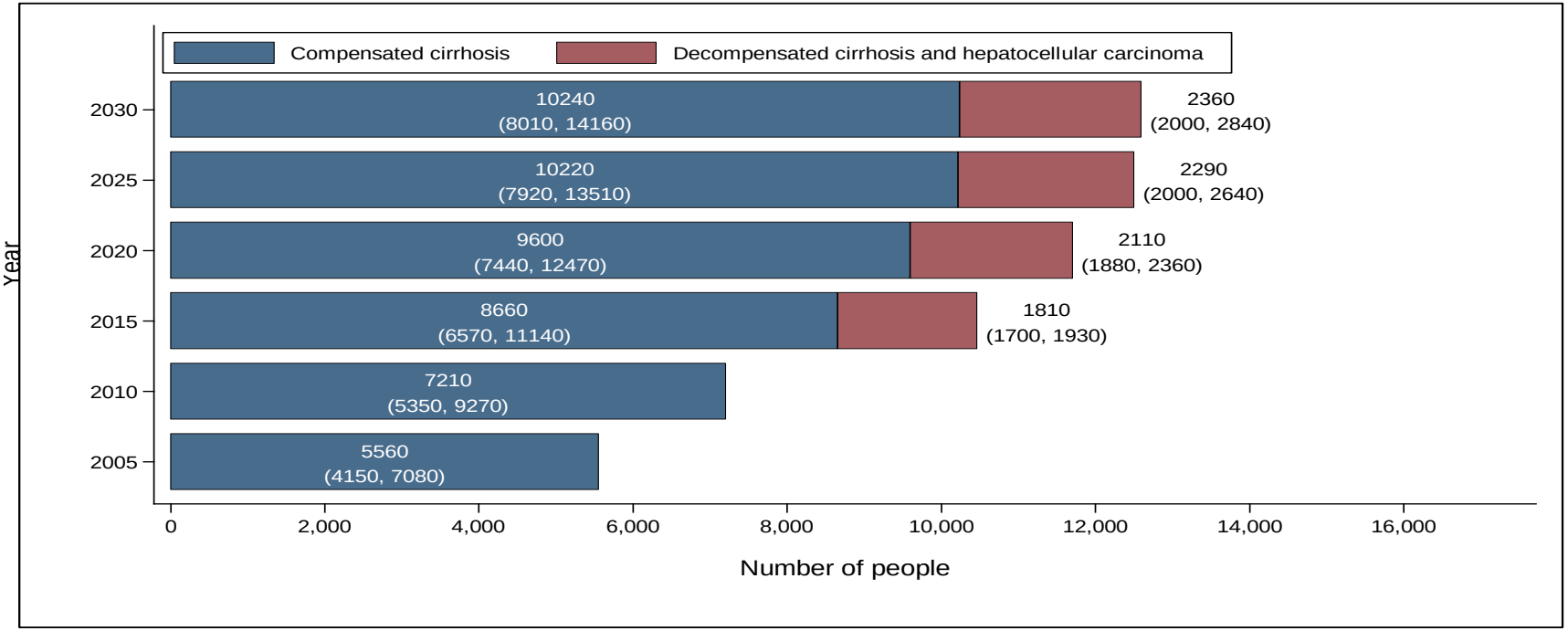
Figure 15. Estimated number of people living with HCV-related cirrhosis or decompensated cirrhosis/HCC in England: 2005 to 2030 (95% credible intervals are given in parentheses)*



*Note: this figure includes the impact of new direct acting antivirals (DAAs) that have been provided to patients with decompensated cirrhosis from 2014 under an early access program, and its continuation.

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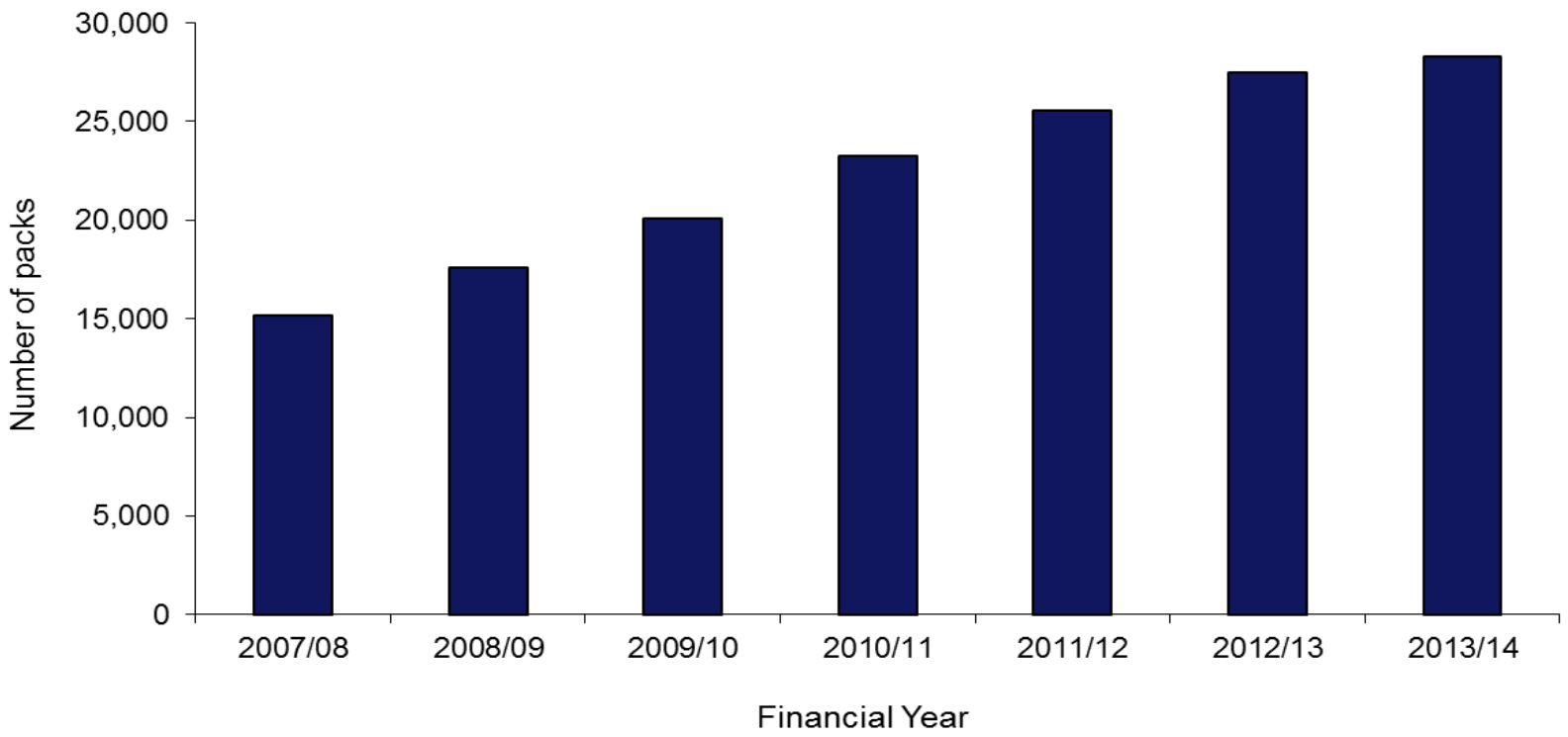
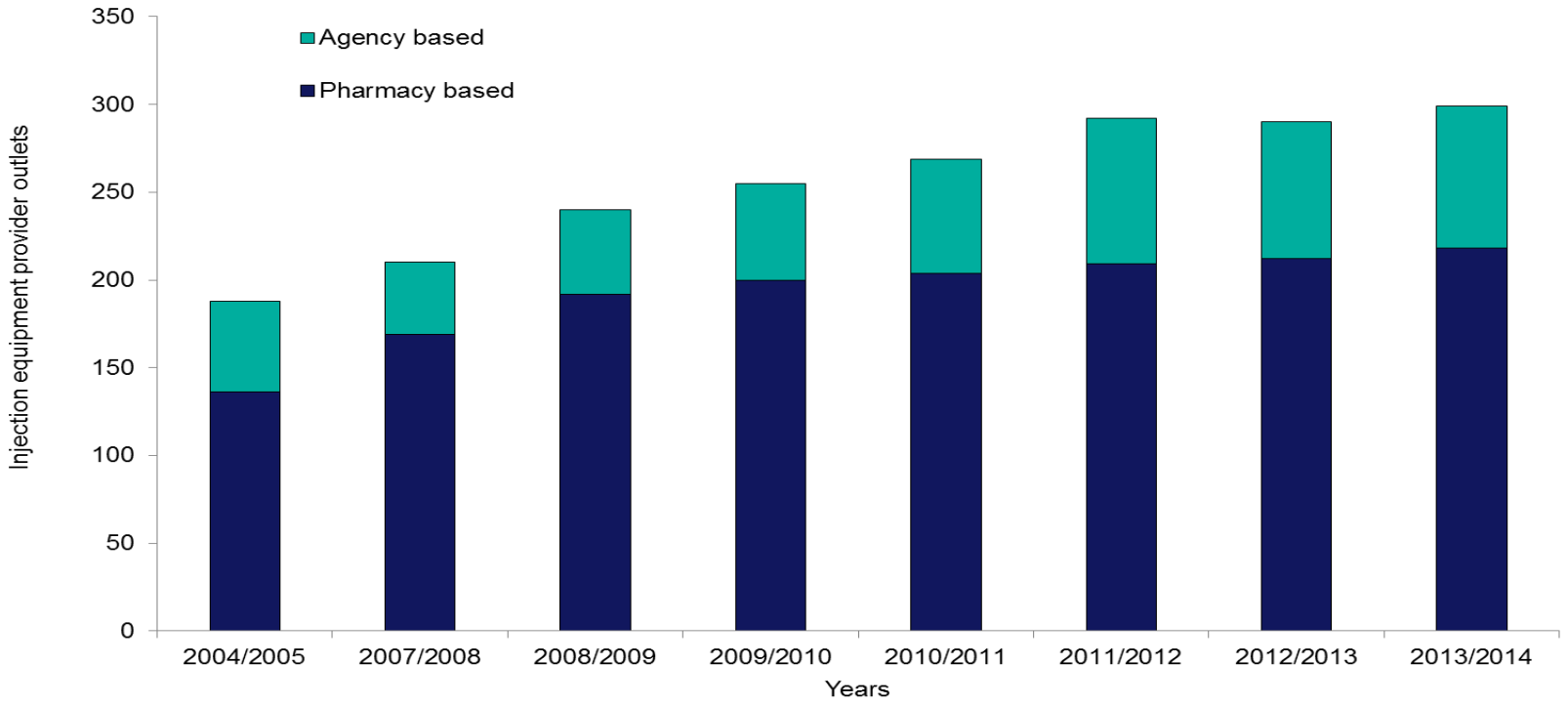
Figure 16. Number of packs dispensed by NSPs in Northern Ireland: 2007/08 to 2013/14



Data Source: Department of Health and Social Services and Public Safety

Public Health England

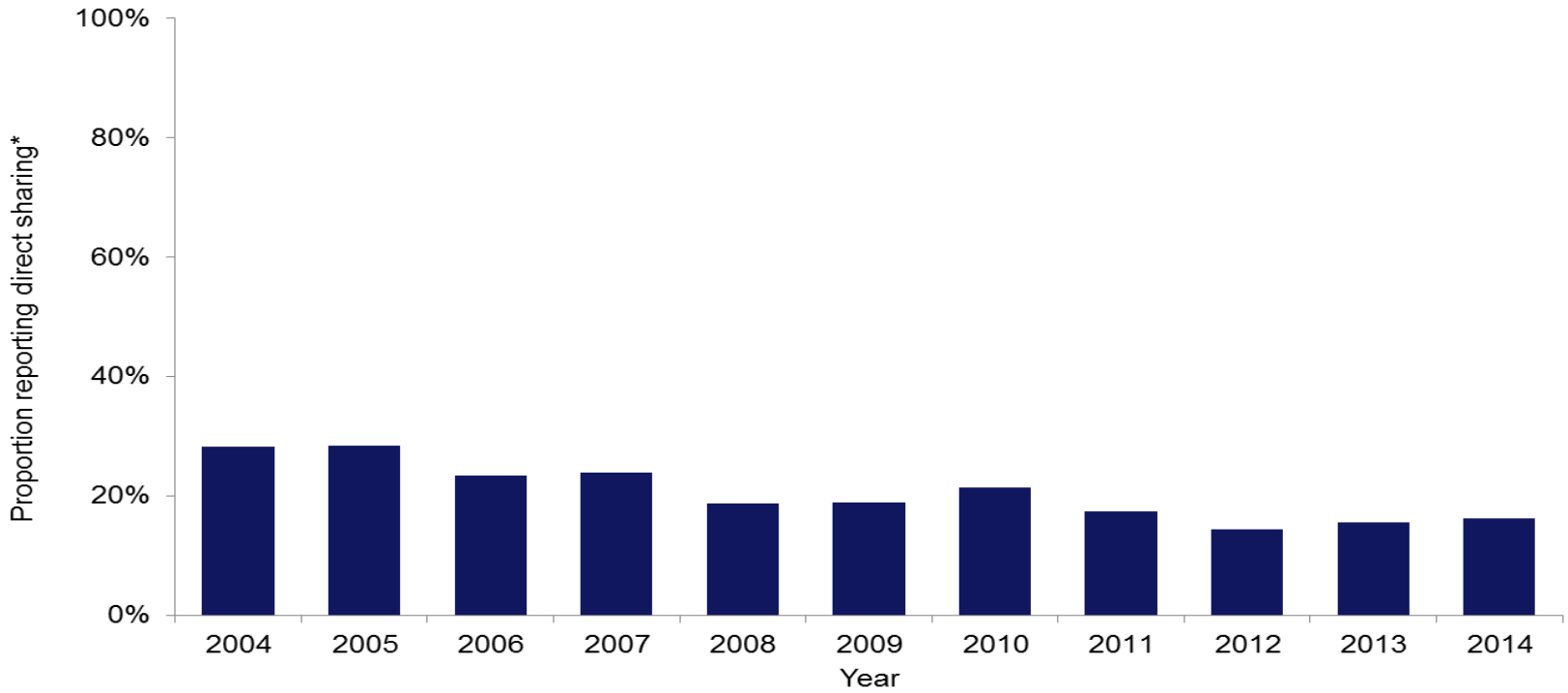
Figure 17. Injection equipment provider outlets operating in Scotland between 2004/2005 and 2013/2014.



Data Source: Information Services Division, NHS National Services Scotland.

Public Health England

Figure 18. Trends in the sharing of needles and syringes in the preceding four weeks among people who inject drugs in England 2004 to 2014



* Sharing of needles and syringes in preceding four weeks.
Data source: Unlinked Anonymous Monitoring Survey of people who inject drugs in contact with specialist services. [5]

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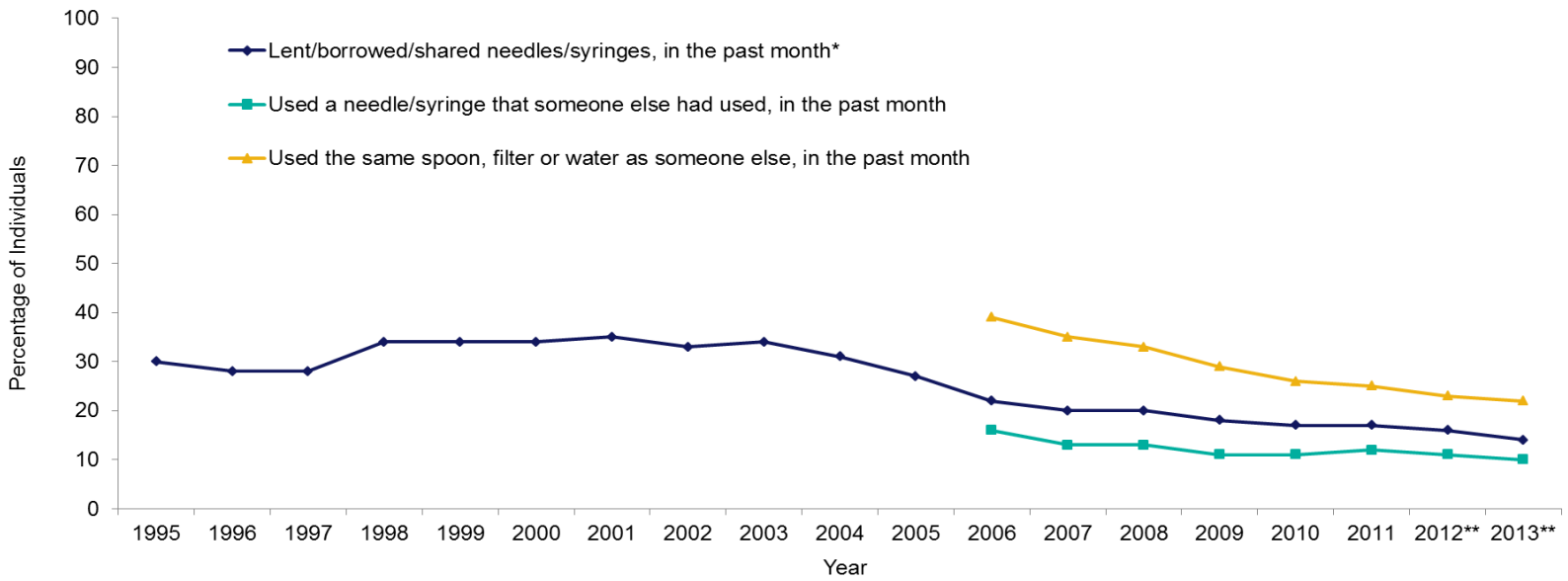
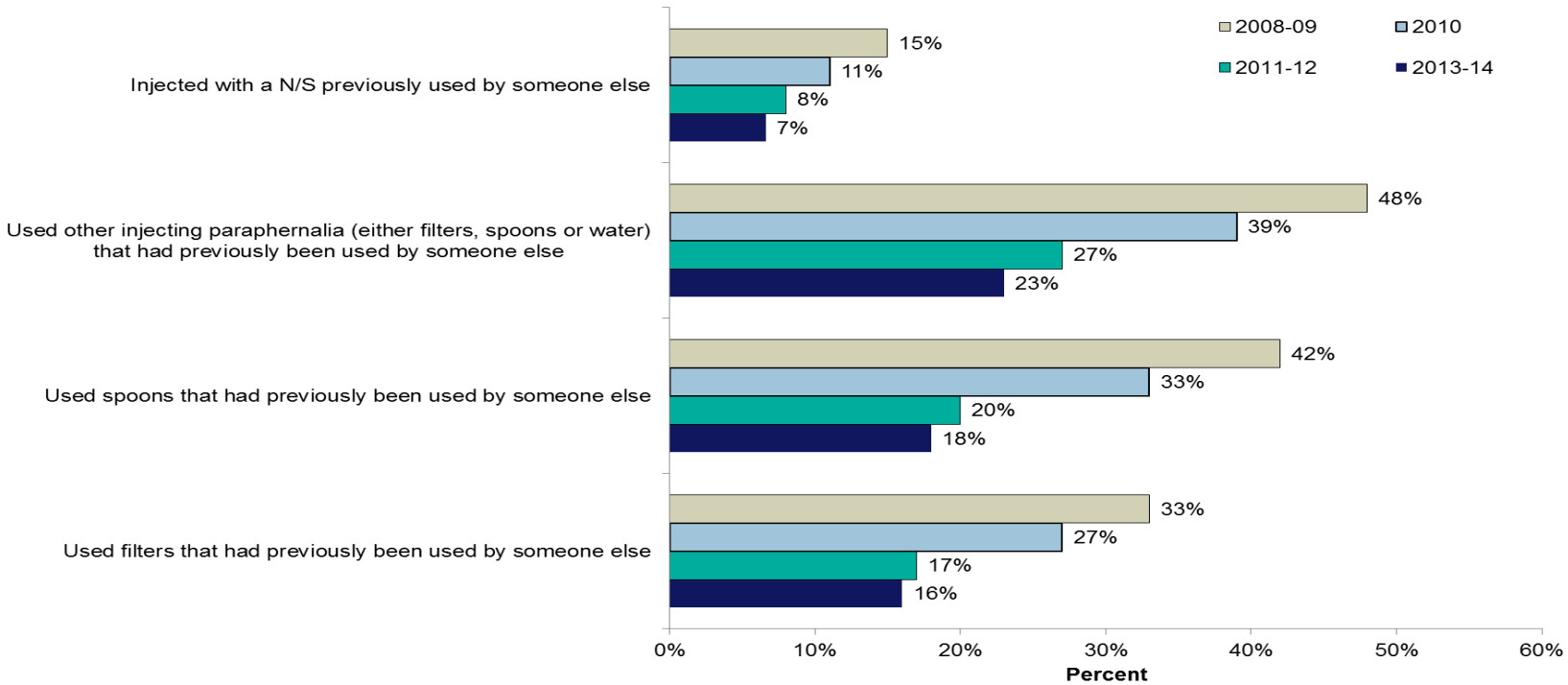
Figure 19. Percentage of individuals who reported that they had shared injecting equipment in the past month, among clients attending drug treatment services in Scotland who had injected drugs in the past month



* From 2006/07 onwards, referred to as either client used a needle/syringe that someone else had used or lent someone else a needle/syringe which client had used, in the past month
** Data for 2012/13 and 2013/14 provisional, as it excludes individuals resident in NHS Greater Glasgow & Clyde & NHS Tayside due to data quality and completeness issues.
Data source: ISD Scotland

Public Health England

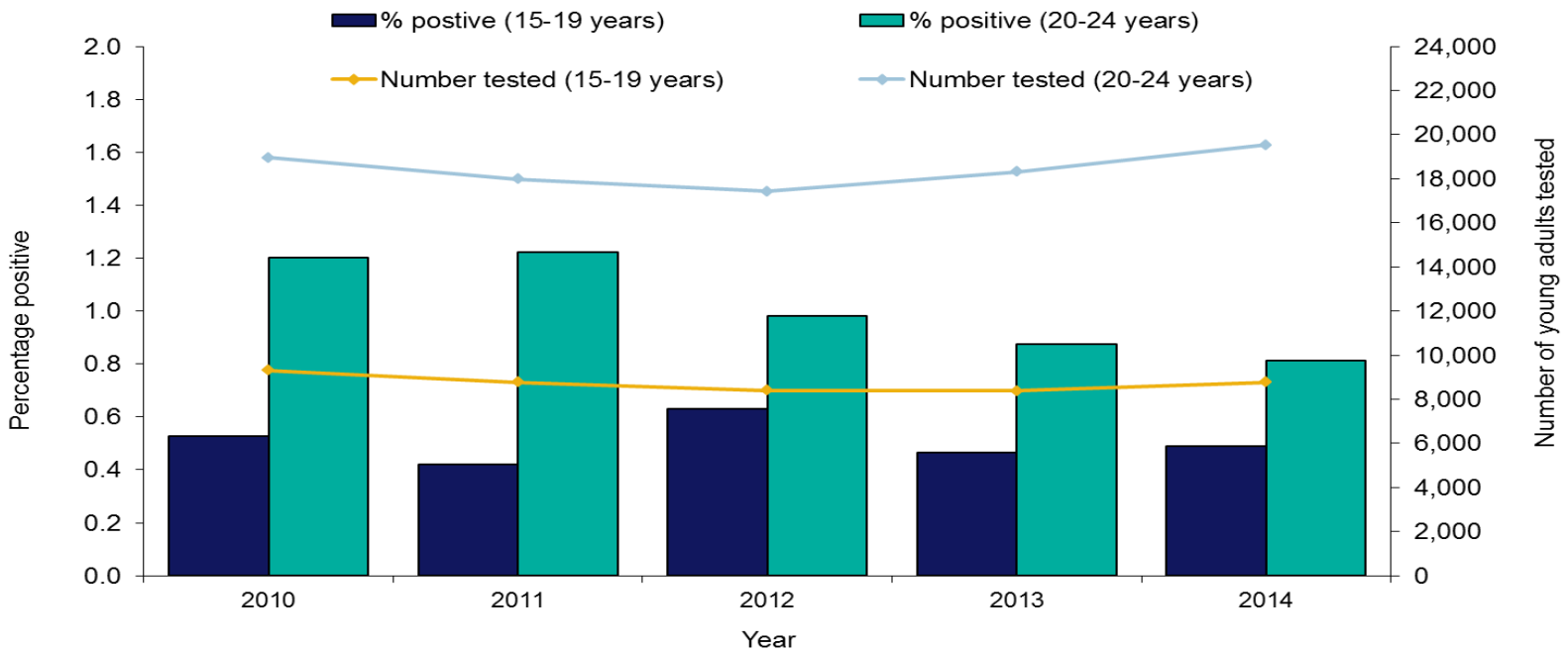
Figure 20. Proportion of PWID, surveyed at services providing injection equipment across mainland Scotland in 2008-09, 2010, 2011-12 and 2013-14, who reported sharing injection equipment.



Data Source: NESI, University of West of Scotland and Health Protection Scotland

Public Health England

Figure 21. Number of anti-HCV tests performed in young adults and proportion positive by year in 23 sentinel laboratories 2010 to 2014

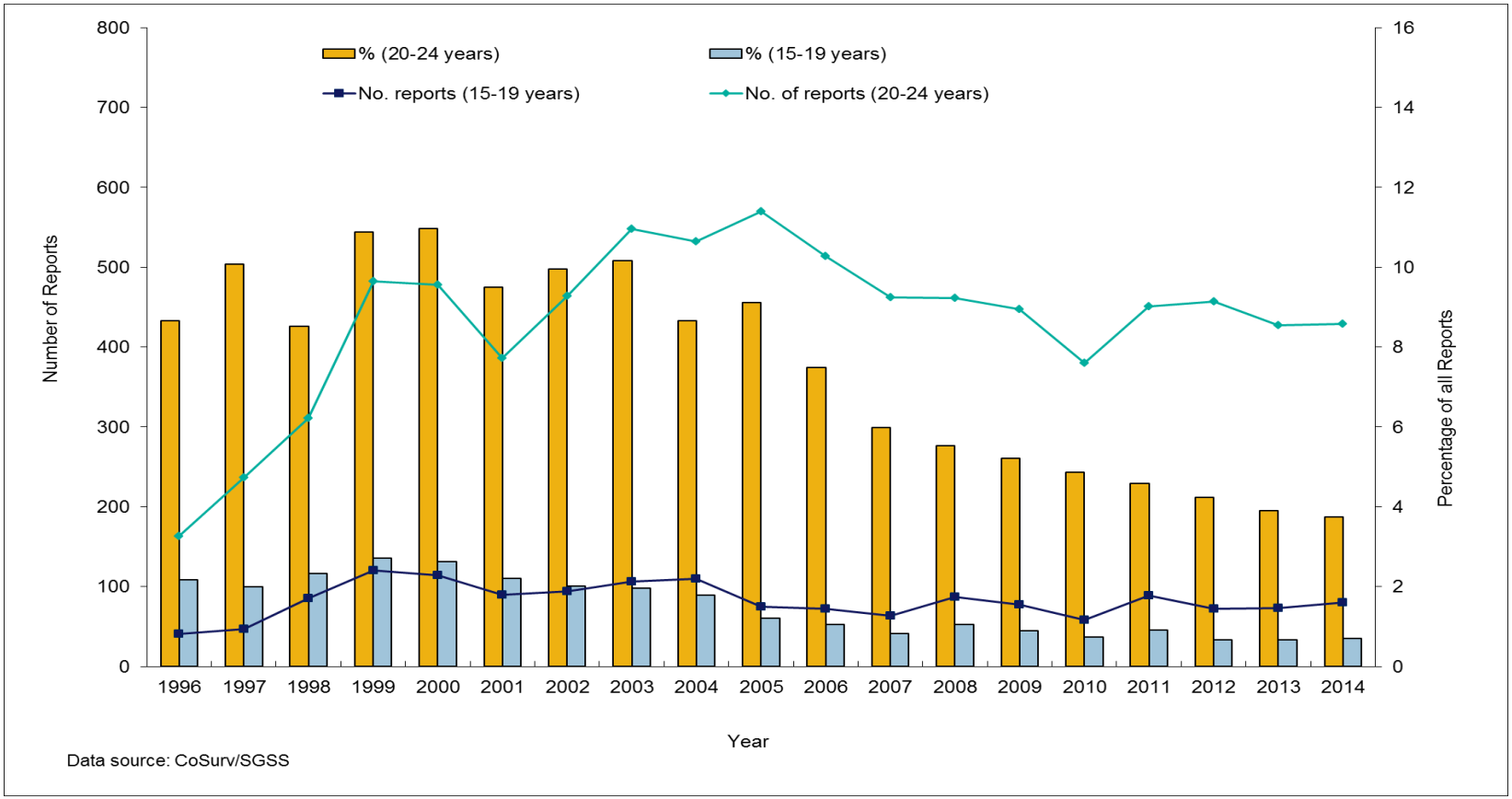


Notes: Excludes dried blood spot, oral fluid, reference testing, and testing from hospitals referring all samples. Some duplication of individual patients may occur due to receipt of incomplete data. Excludes individuals aged less than one year, in whom positive tests may reflect the presence of passively-acquired maternal antibody rather than true infection. All data are provisional.

Data source: Sentinel surveillance of blood borne virus testing.

Public Health England

Figure 22. Laboratory reports* of hepatitis C in young adults in England: 1996 to 2014



*Statutory notifications by diagnostic laboratories was introduced in October 2010[50],[51]

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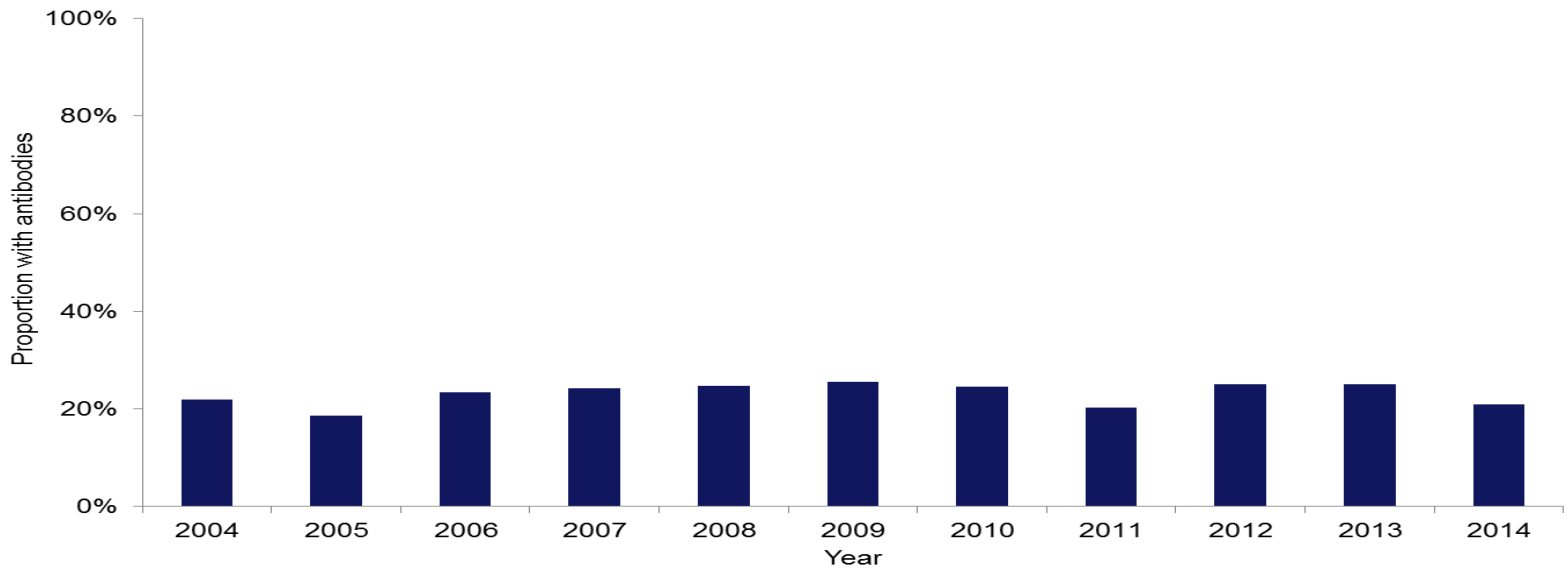
Figure 23. Hepatitis C prevalence* in those who began injecting in the last three years: England 2004 to 2014



Data source: Unlinked Anonymous Monitoring Survey of people who inject drugs in contact with specialist services. [5]

* During 2009 to 2011 there was a phased change in the sample collected in the survey from an oral fluid to dried blood spot (DBS). The sensitivity of the anti-HCV tests on these two sample types is different. The sensitivity of the oral fluid test for anti-HCV is approximately 92%,[38] that on DBS samples is close to 100%. Data presented here have been adjusted for the sensitivity of the oral fluid test.

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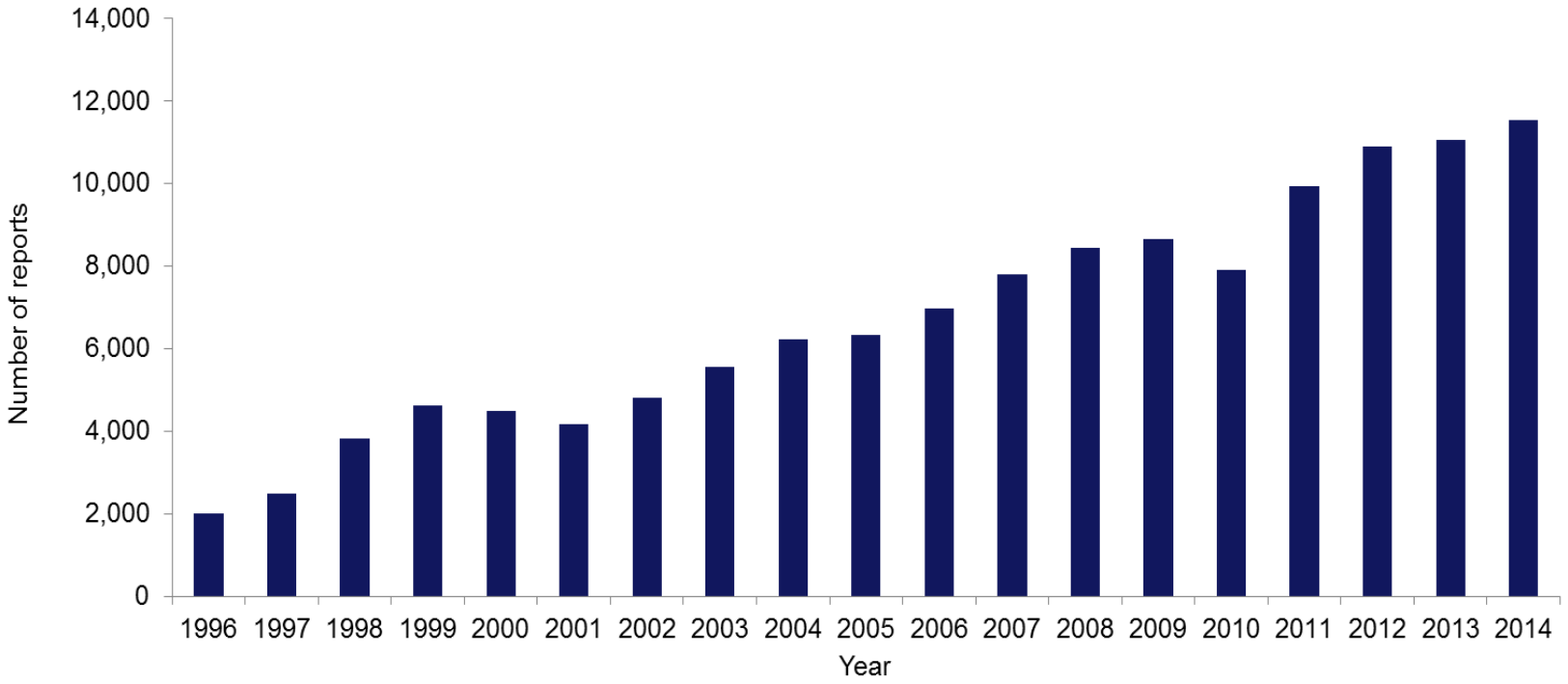
Figure 24. Number of laboratory reports* of hepatitis C from England: 1996 to 2014

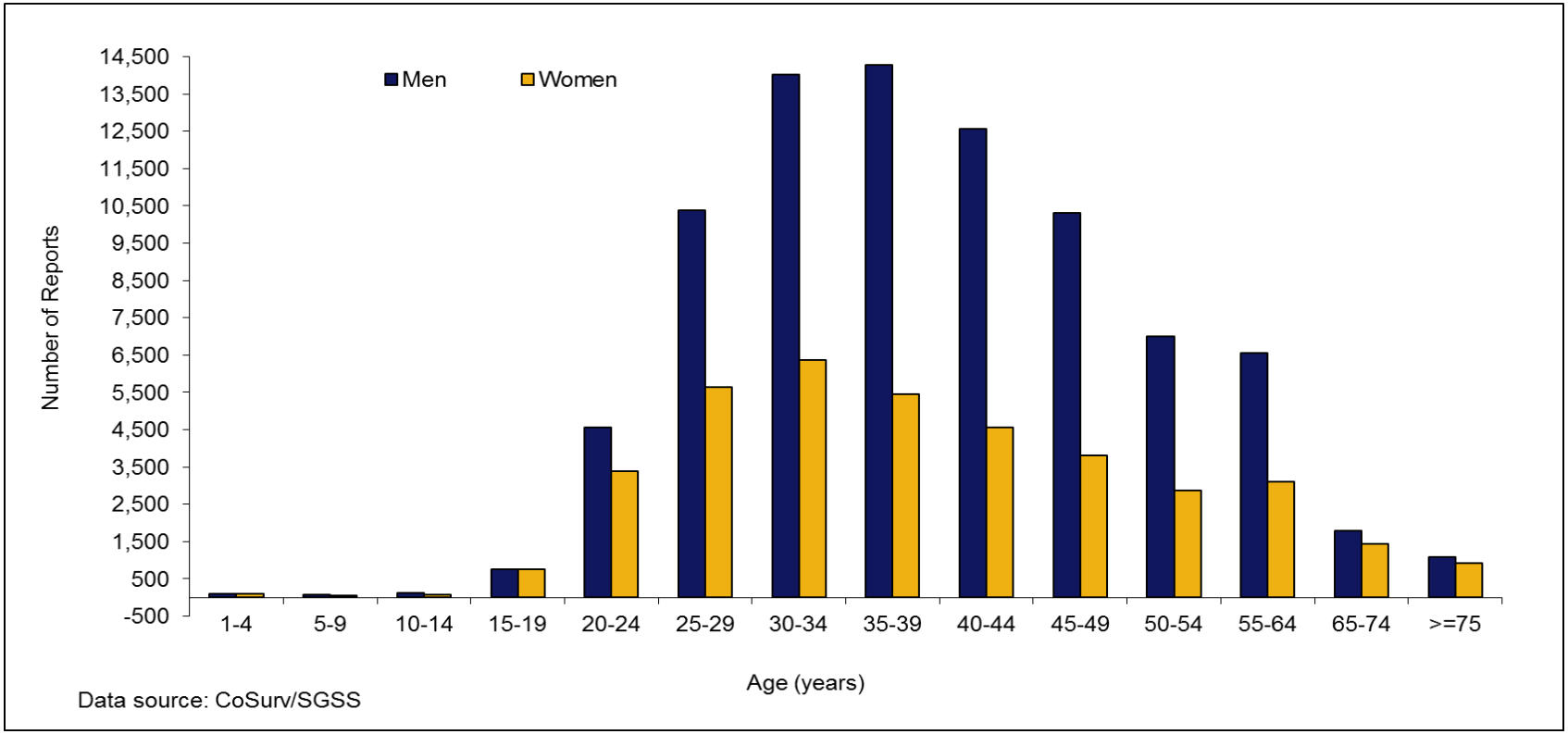


Data source: CoSurv/SGSS

*Statutory notification by diagnostic laboratories was introduced in October 2010[50],[51]

Public Health England

Figure 25. Age and sex distribution of laboratory reports* of hepatitis C from England: 1996 to 2014



*Statutory notifications by diagnostic laboratories was introduced in October 2010[50],[51]

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Map 2. Geographic distribution of centres who have participated in the Sentinel Surveillance of hepatitis Testing Study by Public Health England Centre.

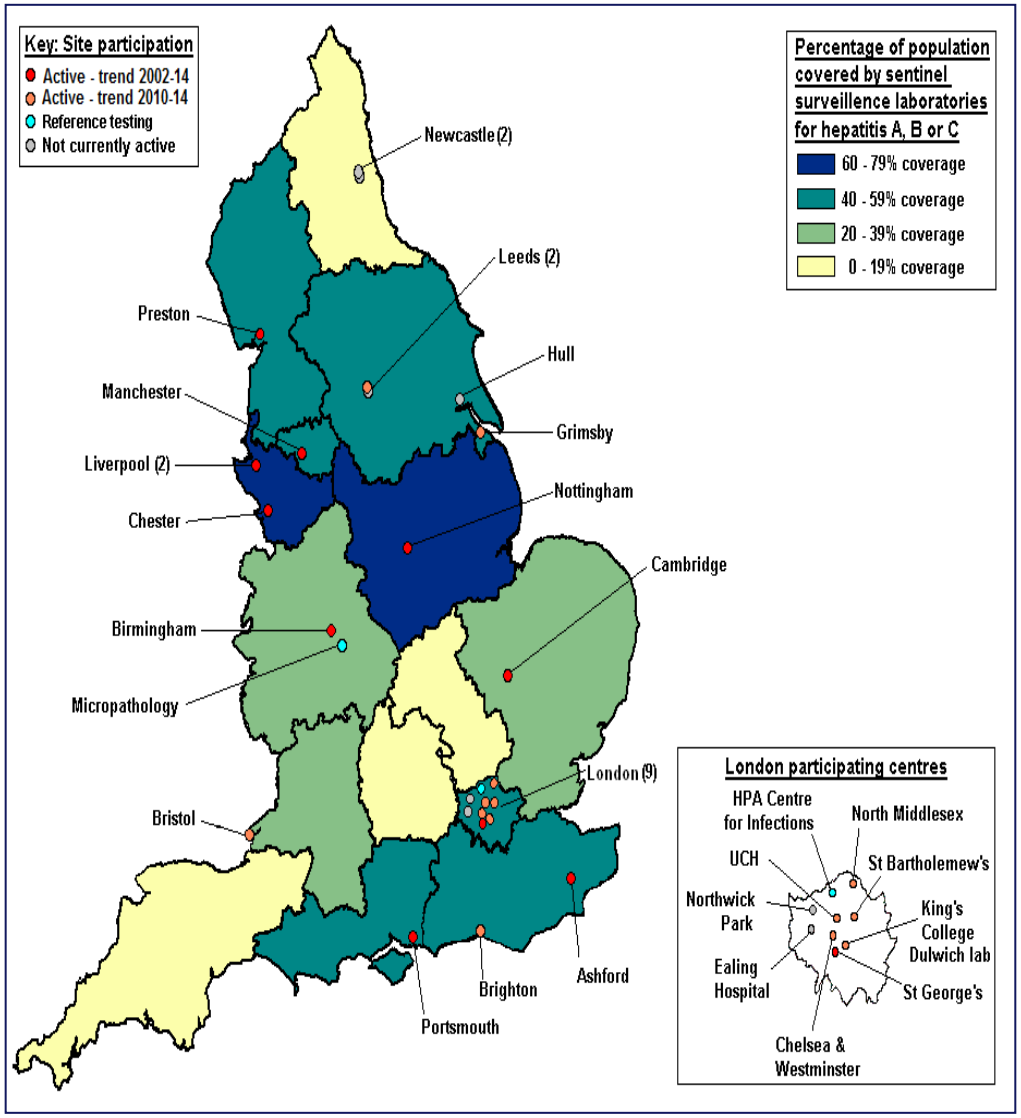

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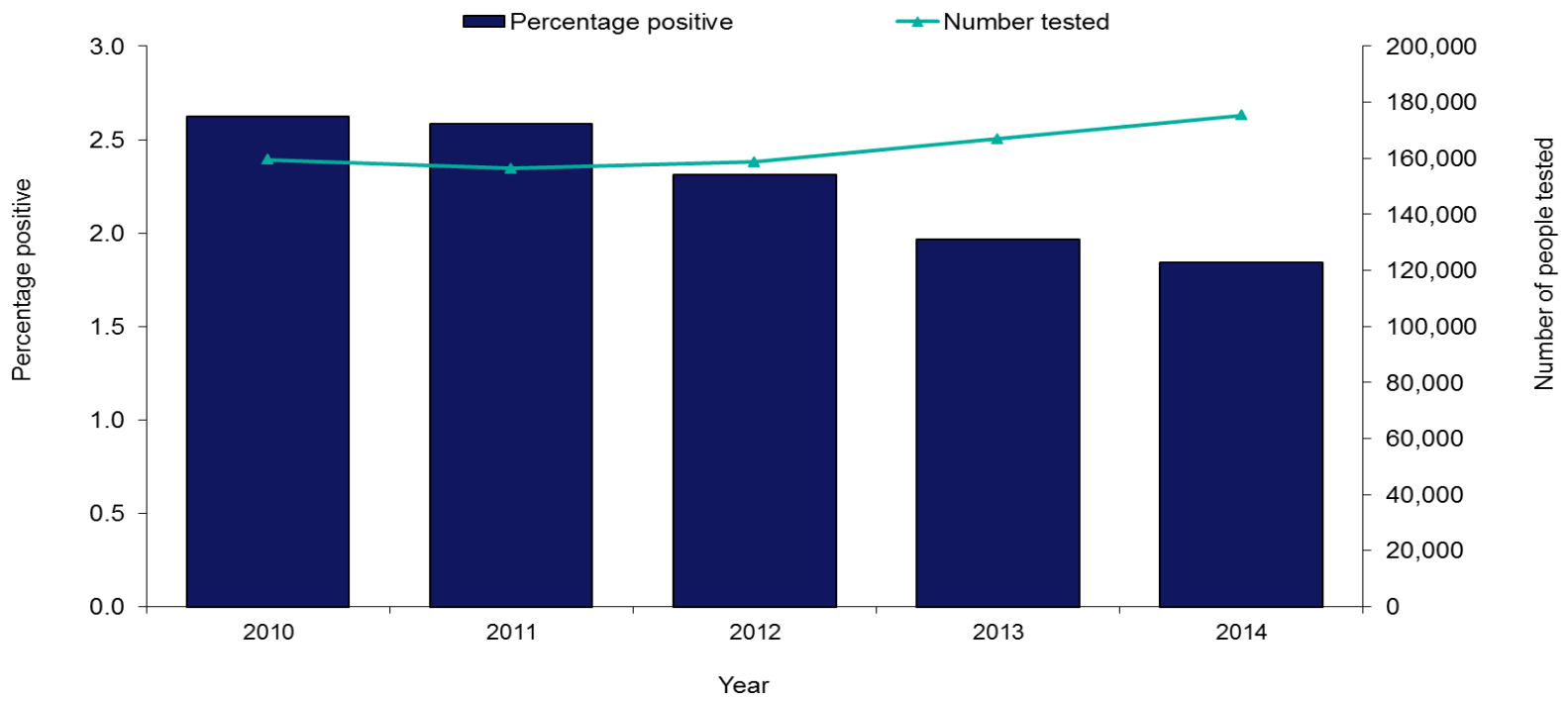
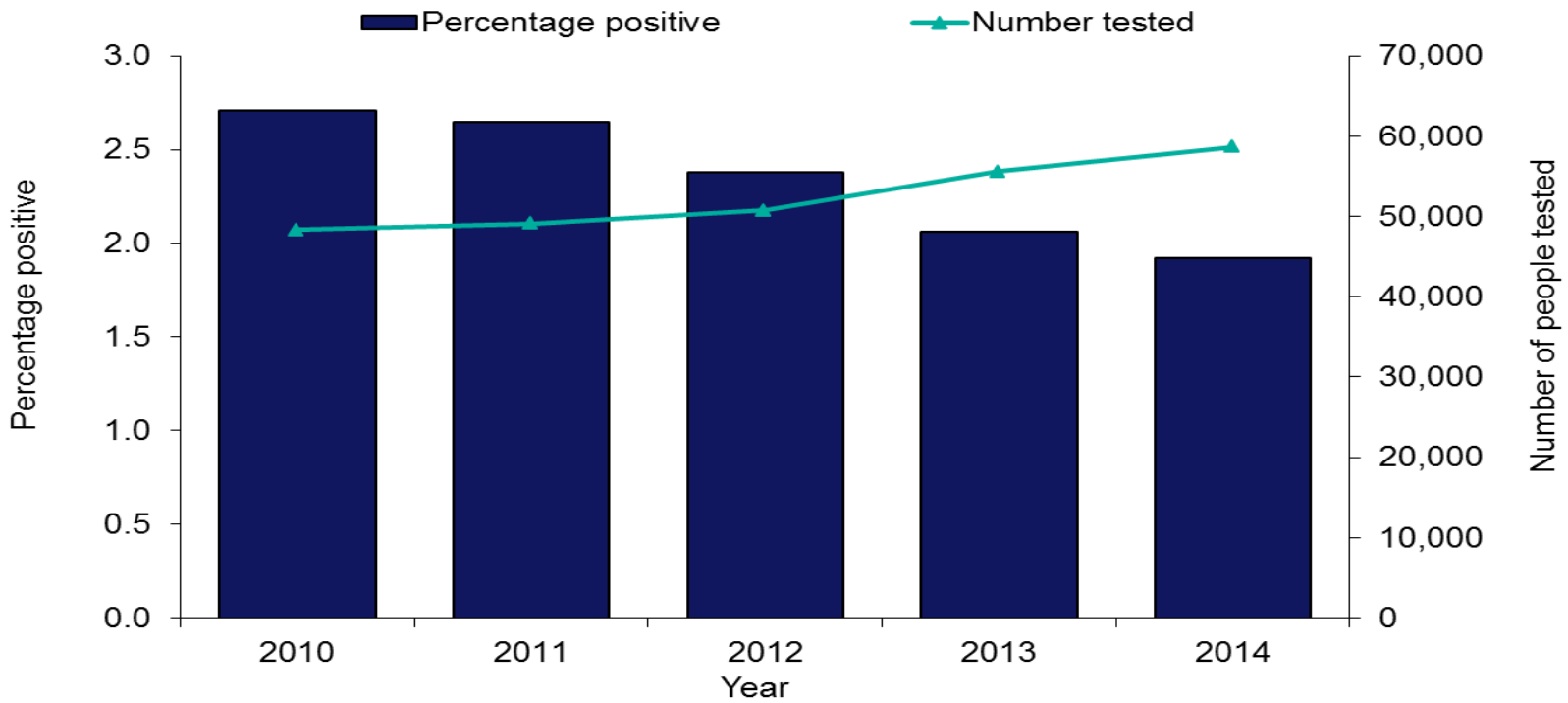
Figure 26. Number of people tested for anti-HCV by year, and proportion positive, in 23 sentinel laboratories: 2010 to 2014



Note: Excludes dried blood spot testing, testing from hospitals referring all samples, reference testing, and children aged <1 year.
Data source: Sentinel surveillance of blood borne virus testing.

Public Health England

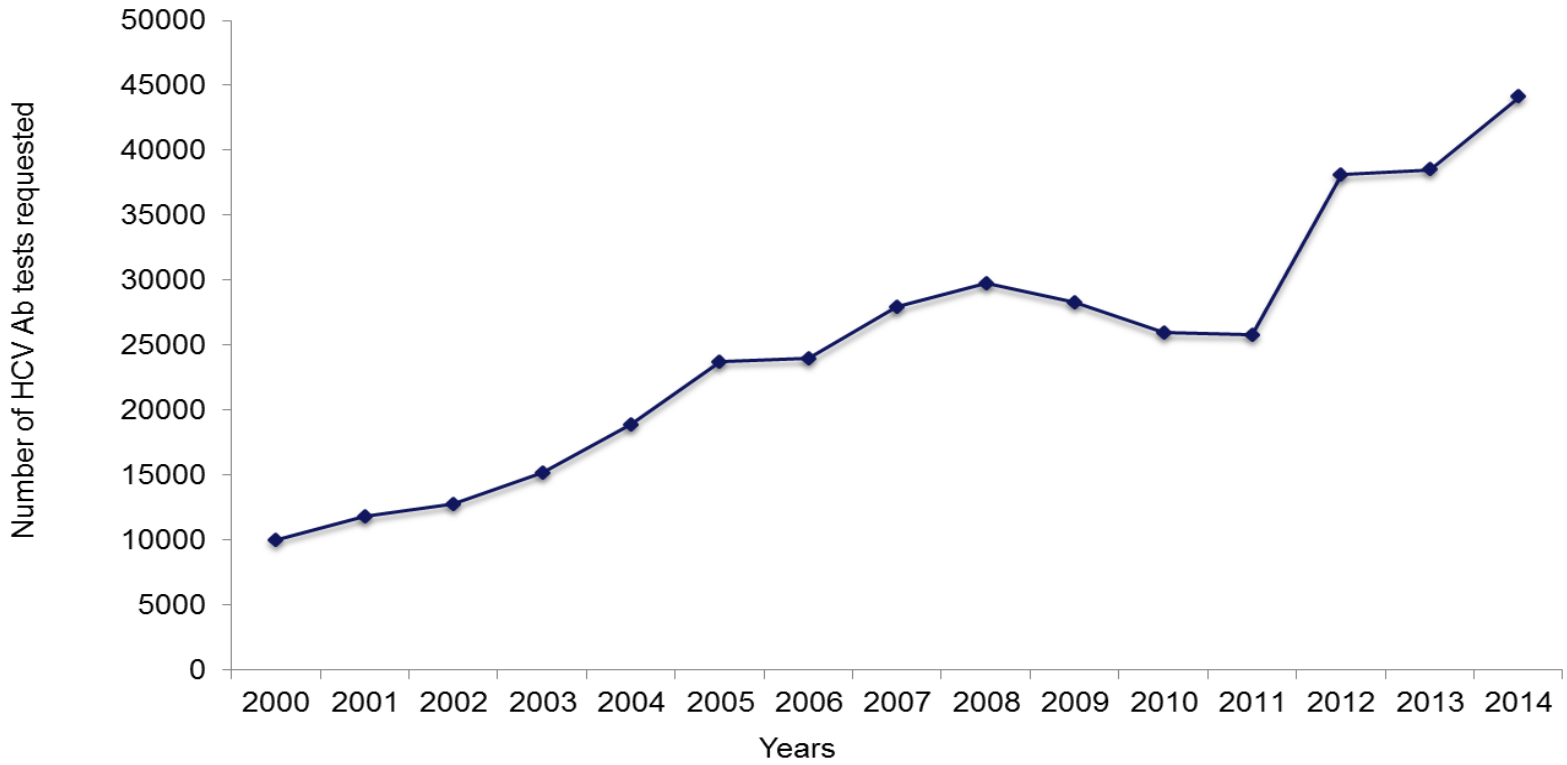
Figure 27. Number of people tested for anti-HCV by year, and proportion positive, through GP surgeries in 23 sentinel laboratories: 2010 to 2014



Note: Excludes dried blood spot testing, and children aged <1 year.
Data source: Sentinel surveillance of blood borne virus testing.

Public Health England

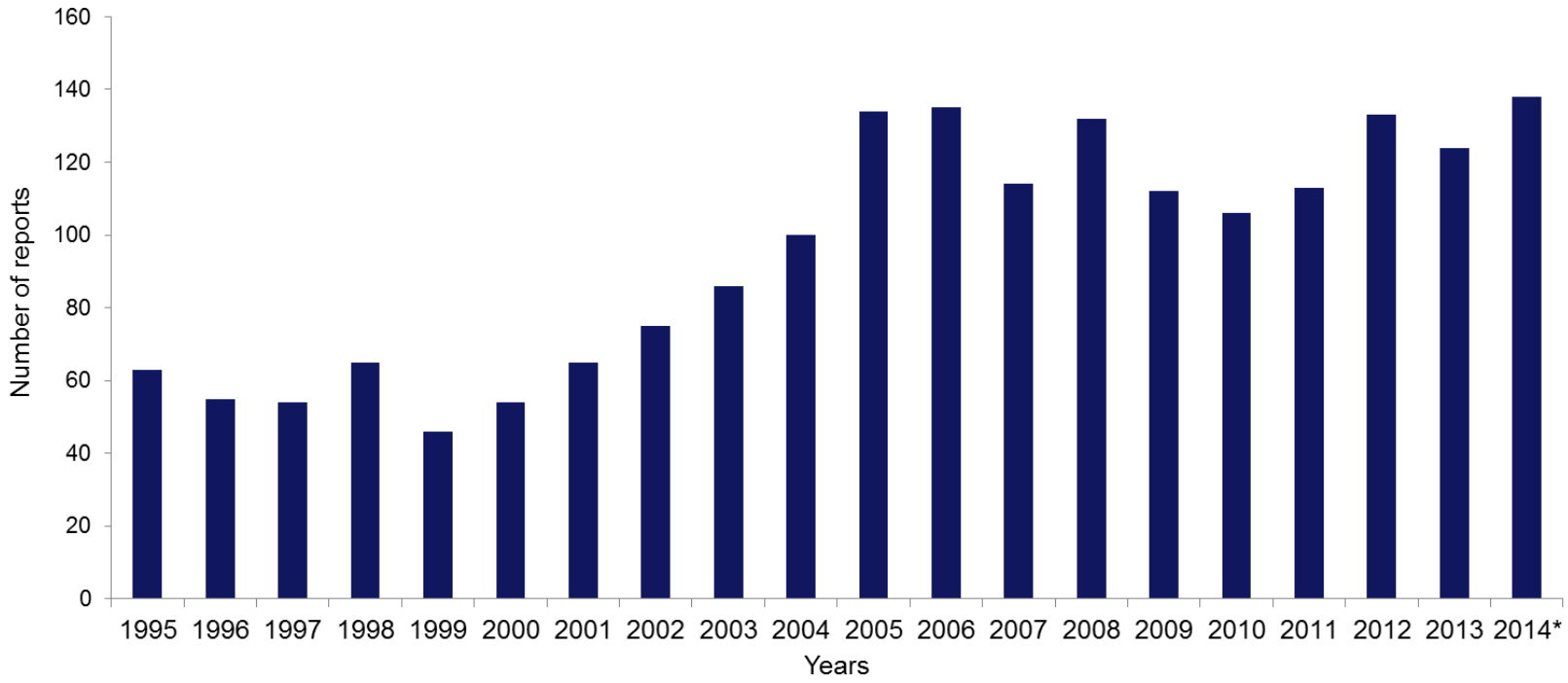
Figure 28. Number of HCV antibody tests requested in Northern Ireland: 2000 to 2014



Data source: Regional Virus Laboratory, Belfast Health and Social Care Trust

Public Health England

Figure 29. Laboratory-confirmed HCV antibody positive cases in Northern Ireland: 1995 to 2014



Data source: Regional Virus Laboratory, Belfast Health and Social Care Trust.
* 2014 data provisional

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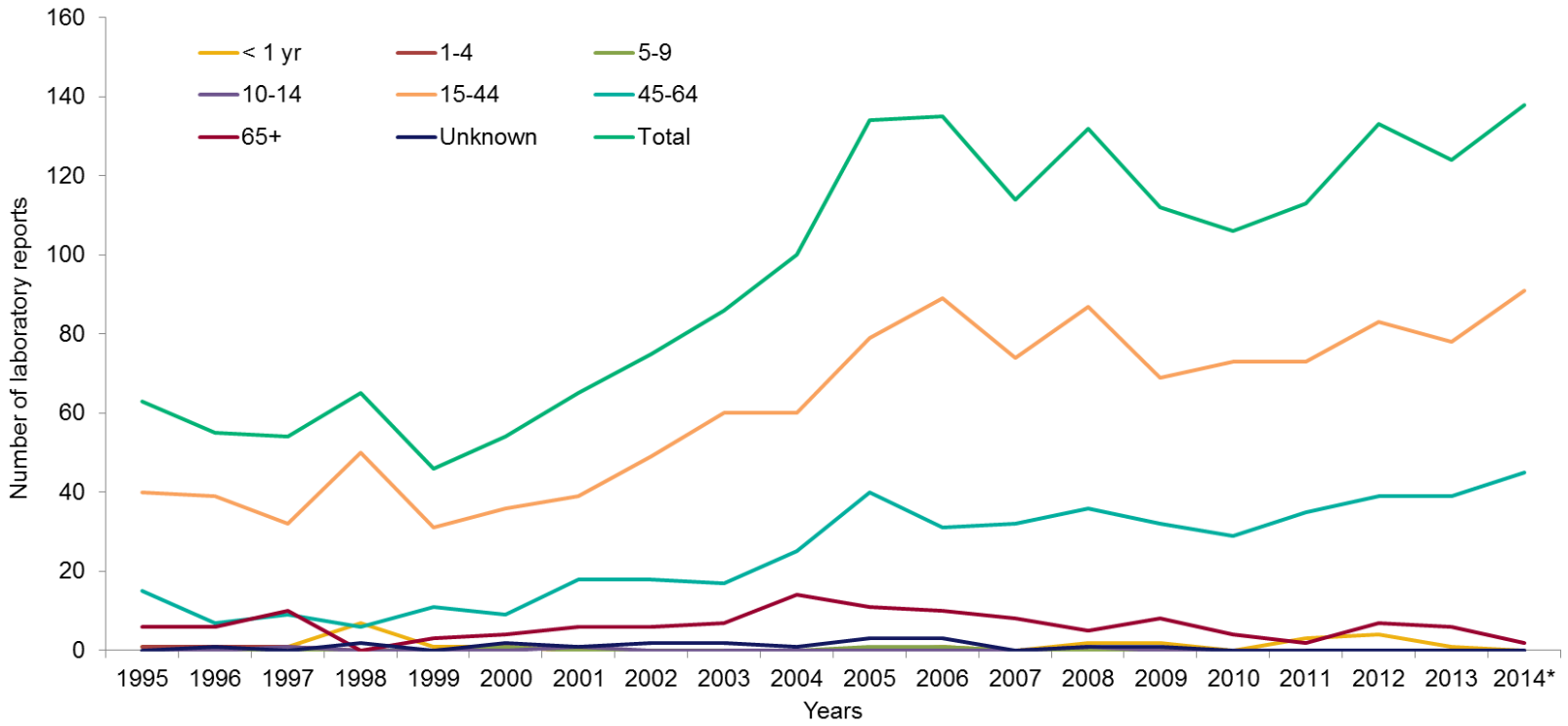
Figure 30. Laboratory confirmed HCV antibody positive cases in Northern Ireland, by age: 1995 to 2014



Data source: Northern Ireland Regional Virology Laboratory.
* 2014 data provisional

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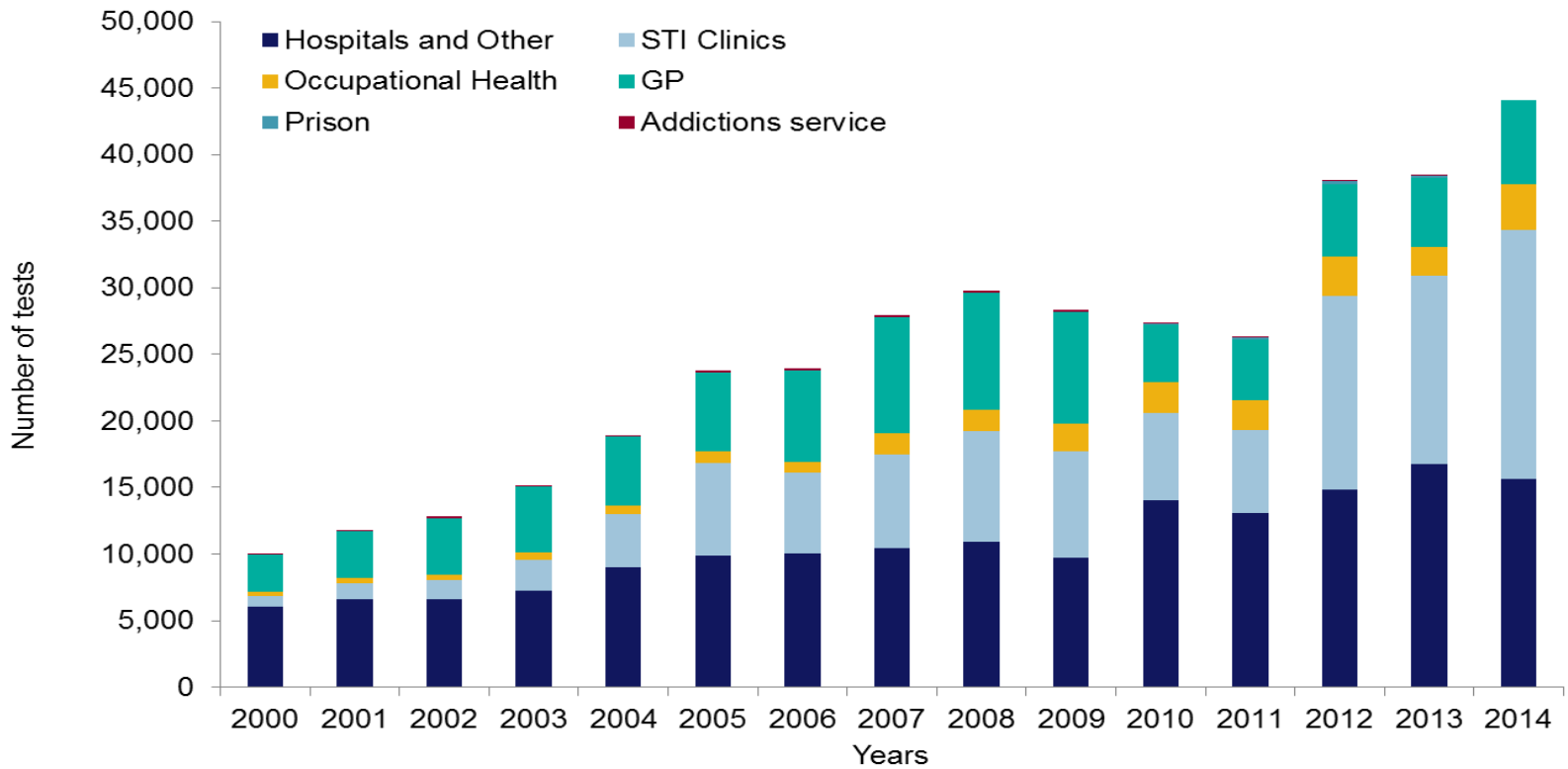
Figure 31. Source of hepatitis C antibody requests in Northern Ireland: 2000 to 2014



Data source: Regional Virus Laboratory, Belfast Health and Social Care Trust

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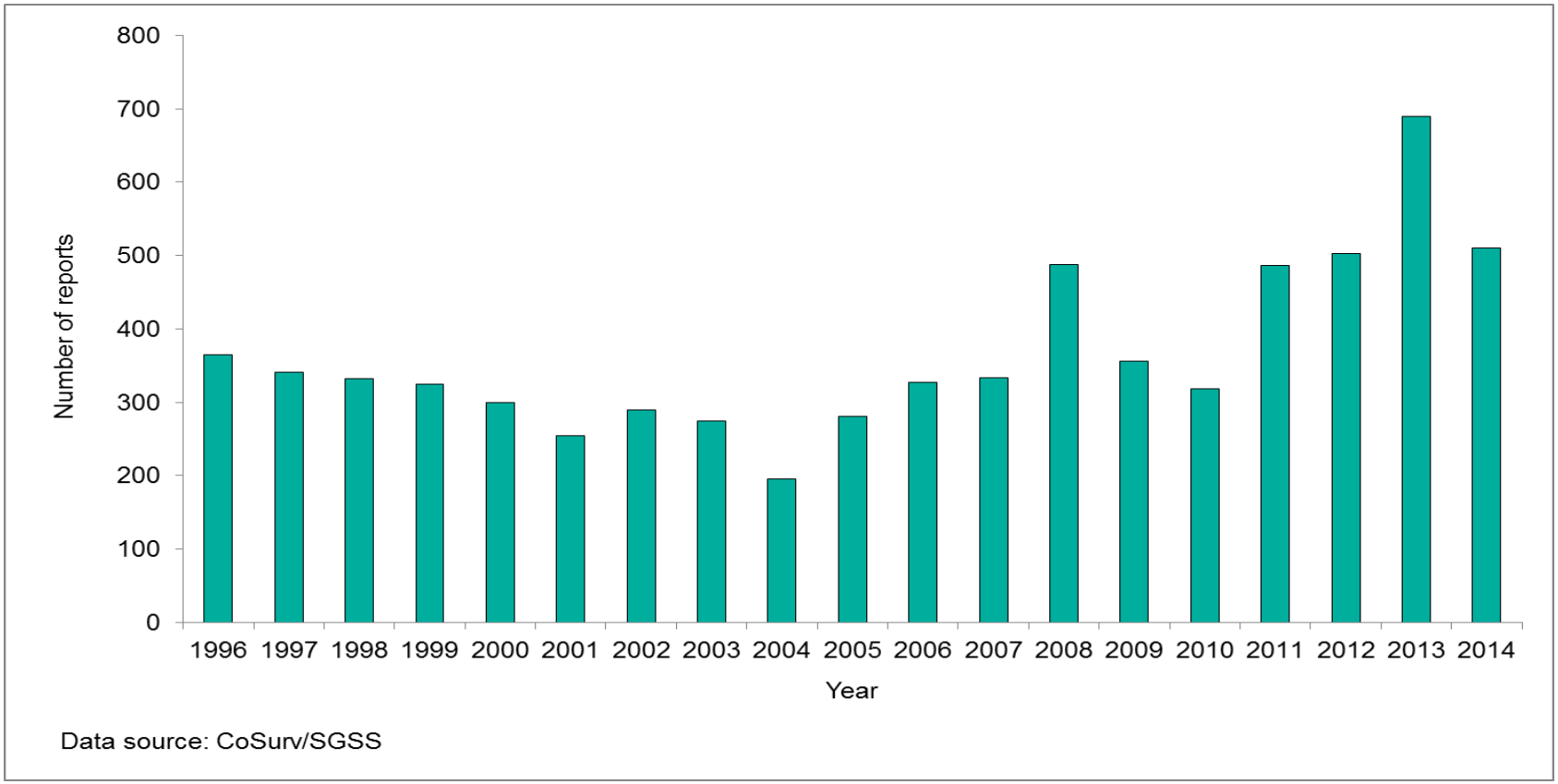
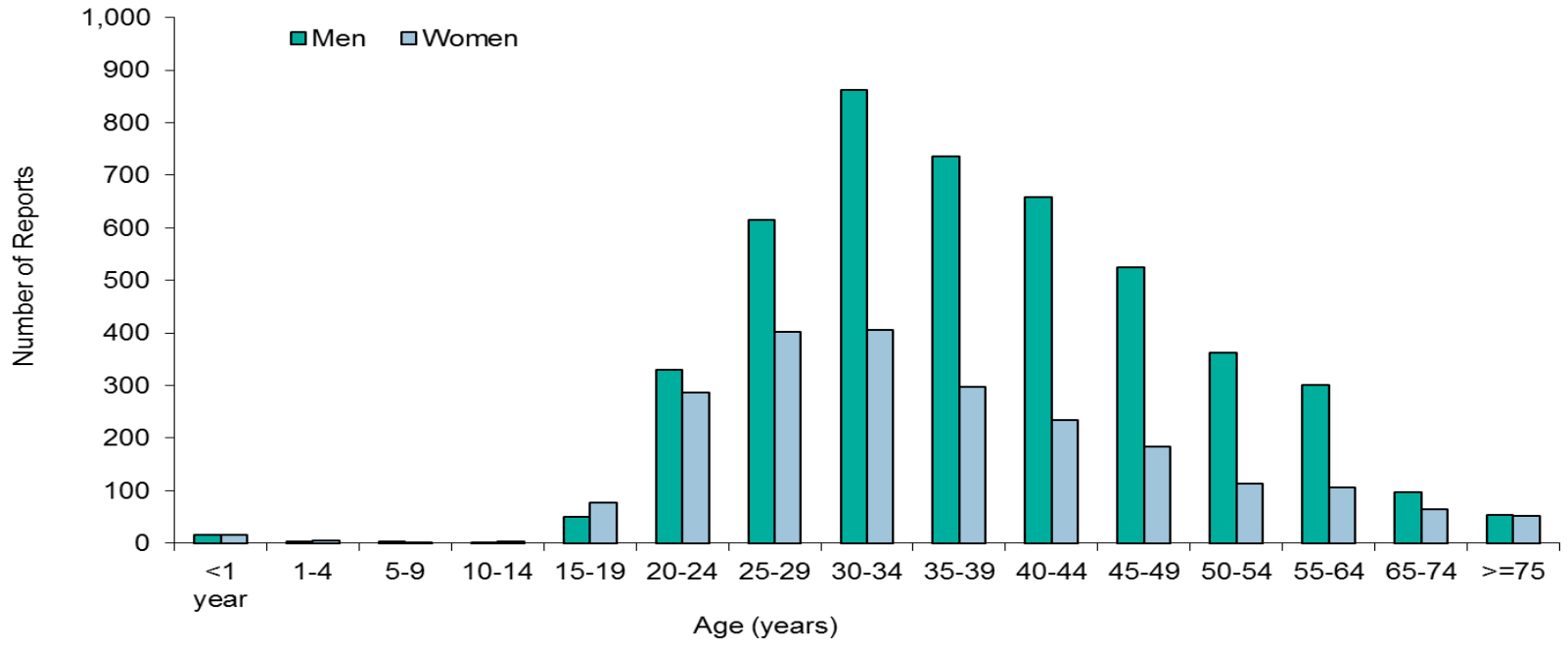
Figure 32. Number of laboratory reports* of hepatitis C from Wales: 1996 to 2014



*Statutory notification by diagnostic laboratories was introduced in October 2010[50], [51]

Figure 33. Age and sex distribution of laboratory reports* of hepatitis C in Wales: 1996 to 2014



Data source: CoSurv/SGSS

*Statutory notification by diagnostic laboratories was introduced in October 2010[50], [51]

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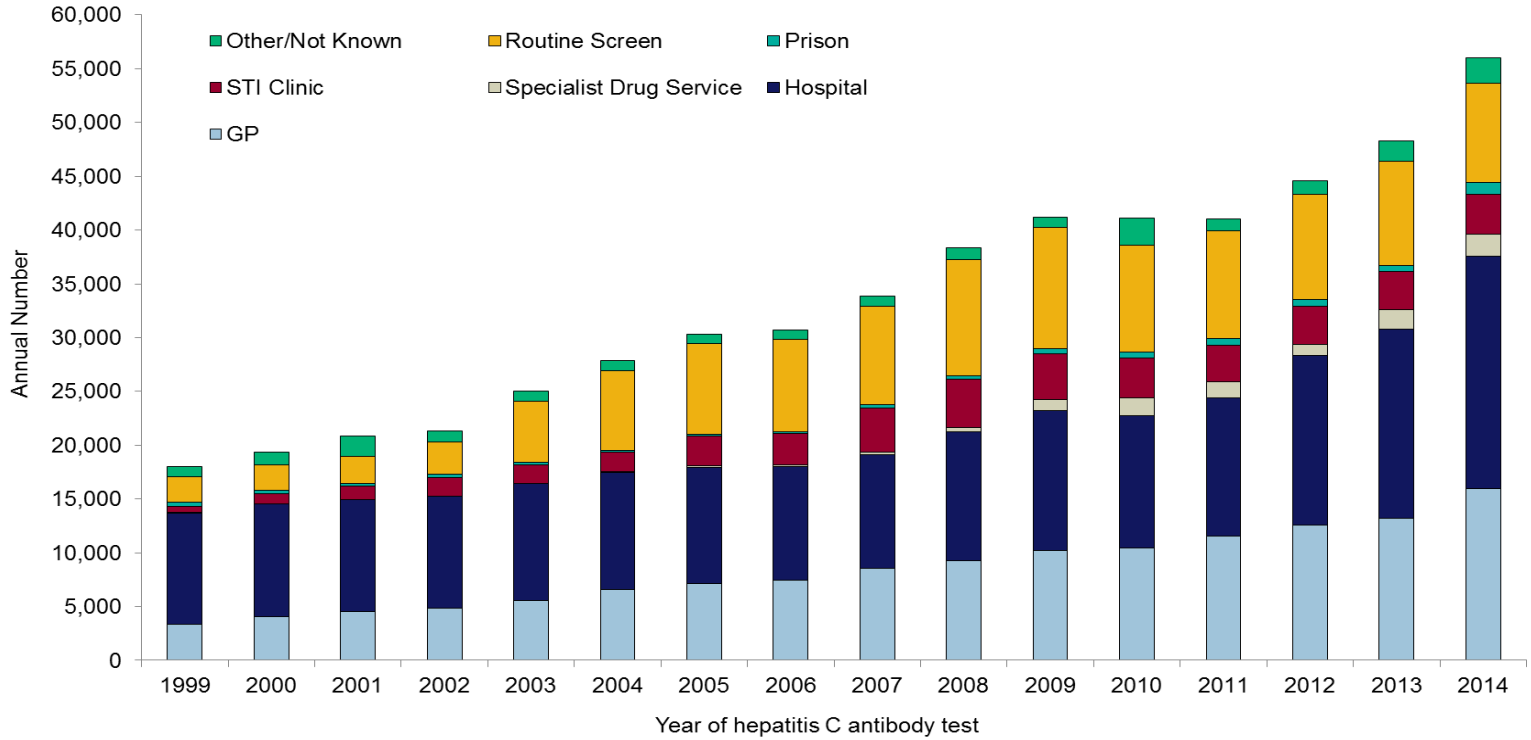
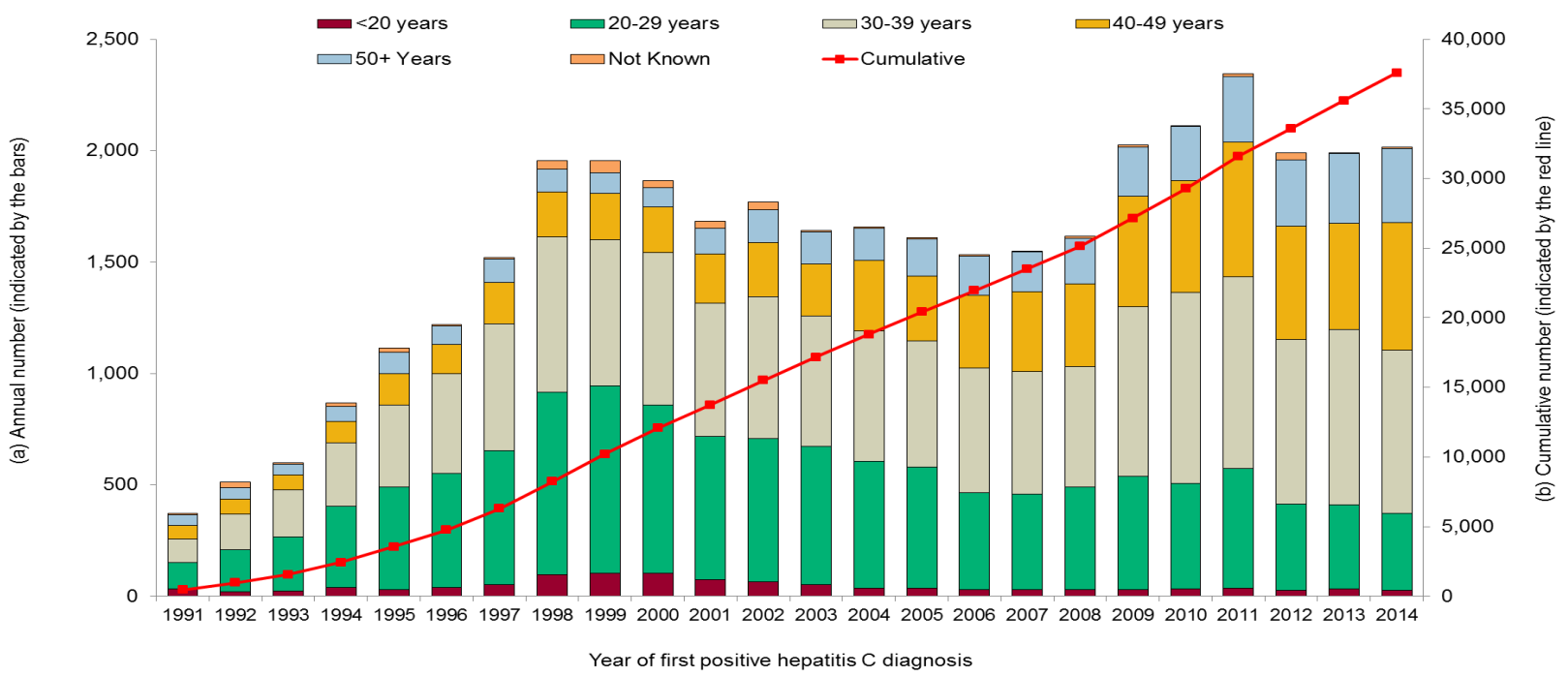
Figure 34. Annual number of people tested for hepatitis C antibody in Scotland's four largest NHS Board areas during 1999 to 2014, according to referral source



Data source: Health Protection Scotland, using data supplied by hepatitis C testing laboratories

Public Health England

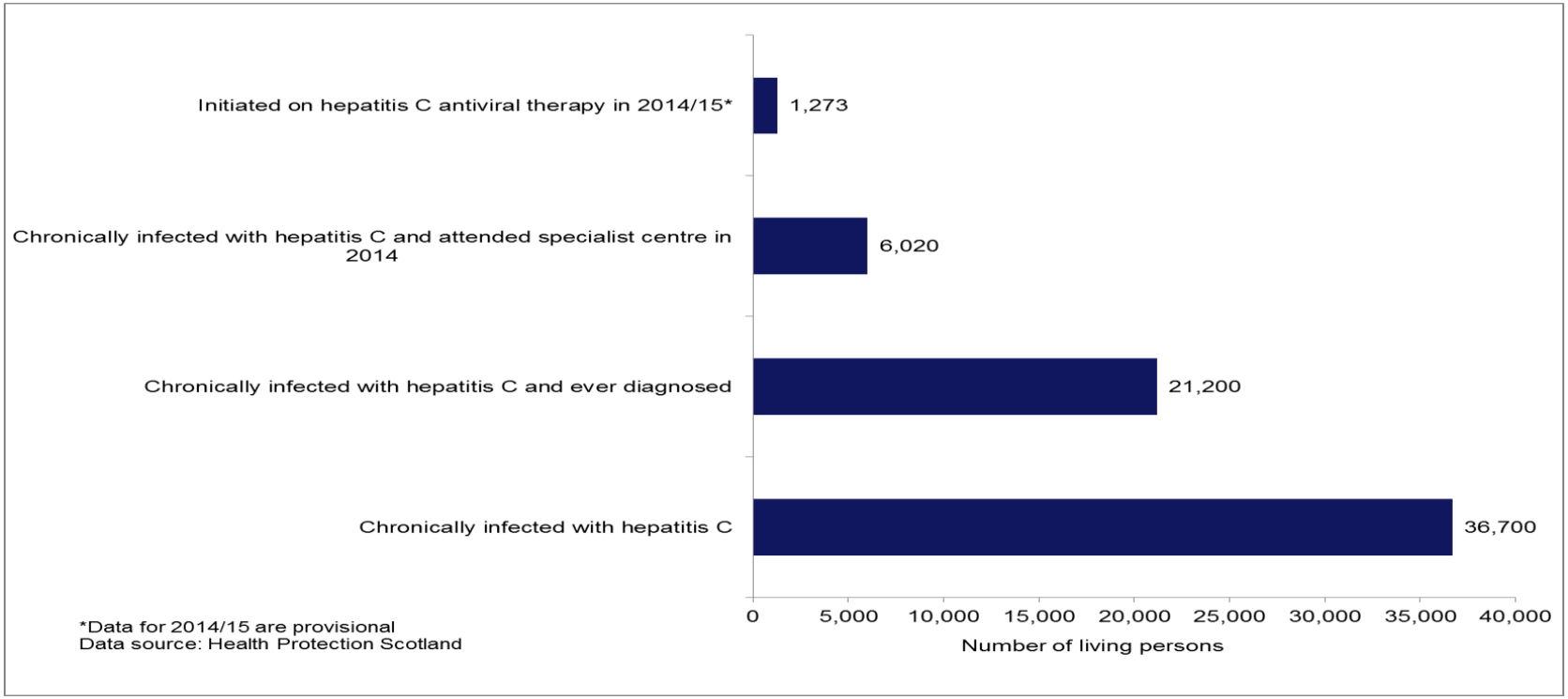
Figure 35. Annual and cumulative numbers of people reported to be diagnosed hepatitis C antibody positive in Scotland, 1991 to 2014



Data source: Health Protection Scotland, using data supplied by hepatitis C testing laboratories

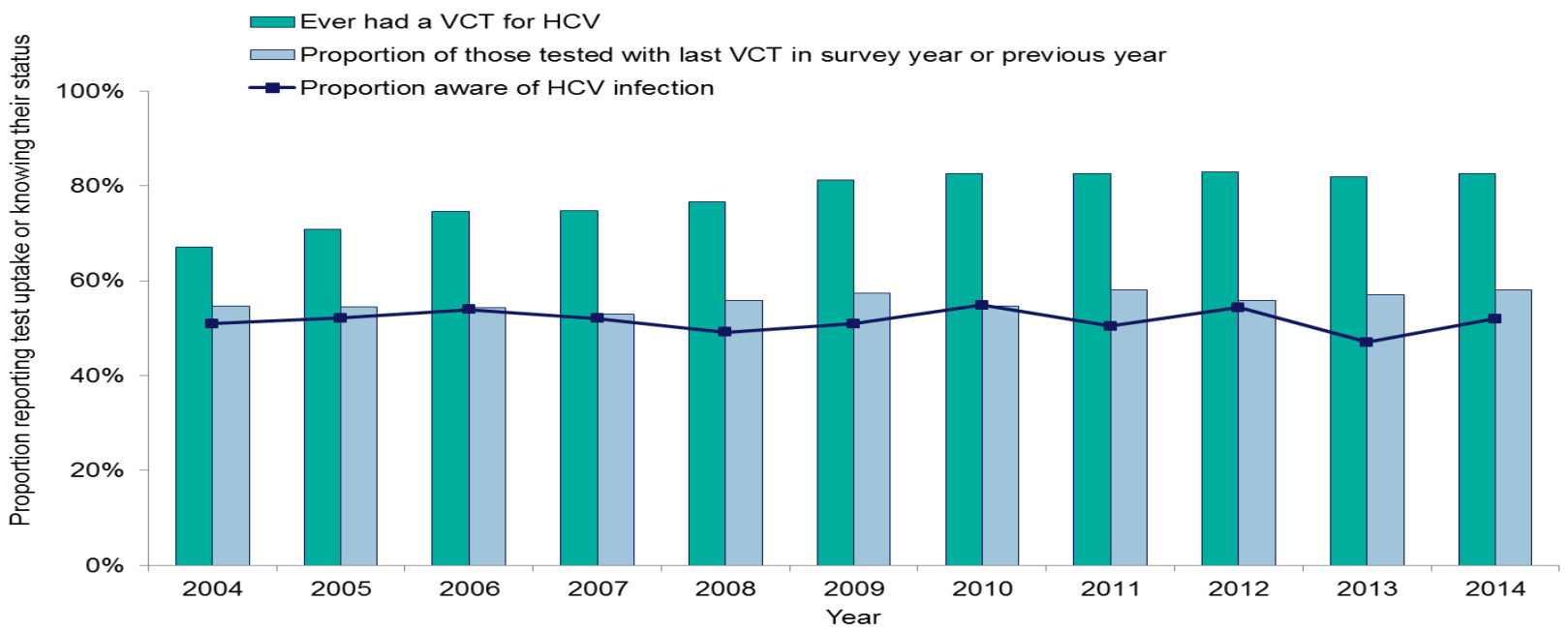
Public Health England

Figure 36. Estimated number of living people in Scotland in 2014, who were (i) chronically infected with hepatitis C, (ii) chronically infected with hepatitis C and ever diagnosed, (iii) chronically infected with hepatitis C and had attended a specialist centre in 2014, and (iv) initiated on hepatitis C antiviral therapy in 2014/15*



Public Health England

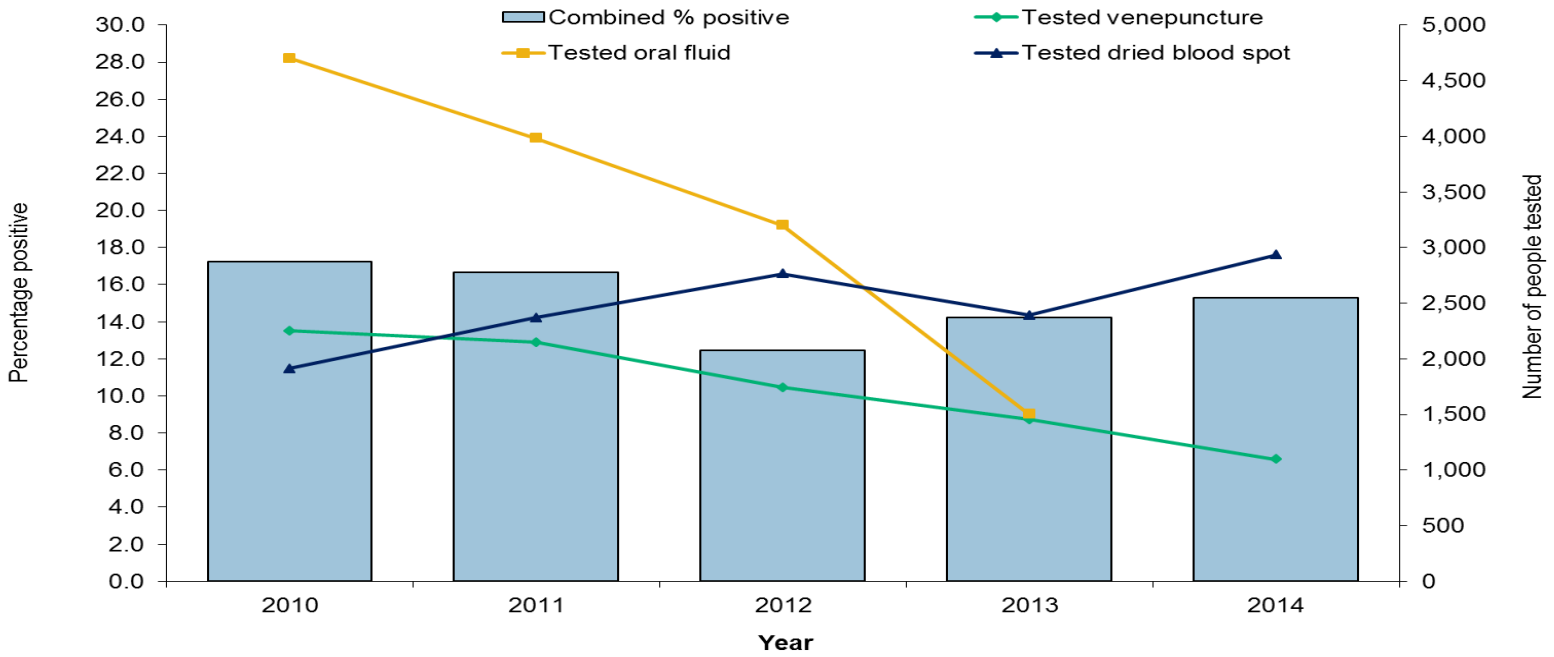
Figure 37. Trends in reported uptake of voluntary confidential testing (VCT) for HCV infection and the proportion of those with HCV reporting being aware of their infection in England: 2004 to 2014



Data source: Unlinked Anonymous Monitoring Survey of people who inject drugs in contact with specialist services. [5]

Public Health England

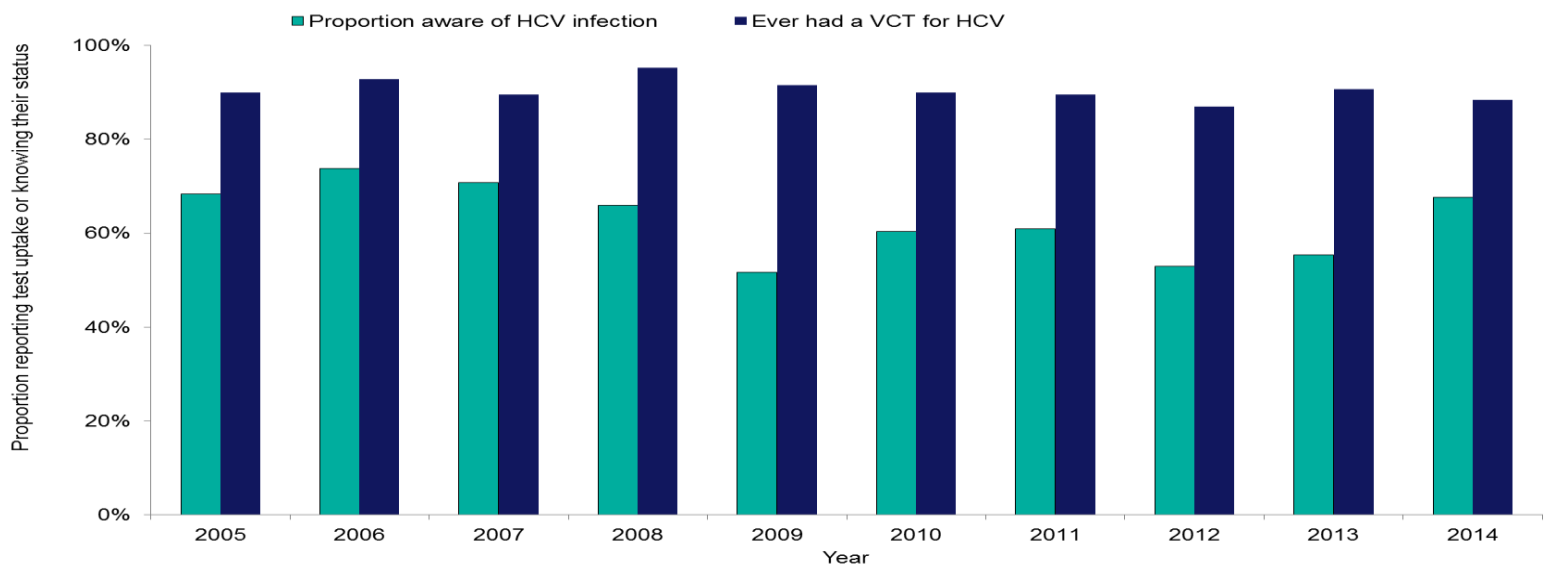
Figure 38. Number of people who inject drugs tested for anti-HCV in specialist services for drug users, by year, from multiple data sources: 2010 to 2014



Notes: Sentinel surveillance data excludes reference testing, testing from hospitals referring all samples, and children aged <1 year. Only centres with complete data for the whole period were included.
Oral fluid and dried blood spot testing data excludes samples tested where a drug action team could not be identified.
Oral fluid data were not available for 2014
Data Source: Sentinel Surveillance of blood borne virus testing and Alere Toxicology Plc.

Public Health England

Figure 39. Trends in reported uptake of voluntary confidential testing for HCV infection, and the proportion of those with HCV reporting being aware of their infection in Northern Ireland: 2005 to 2014*

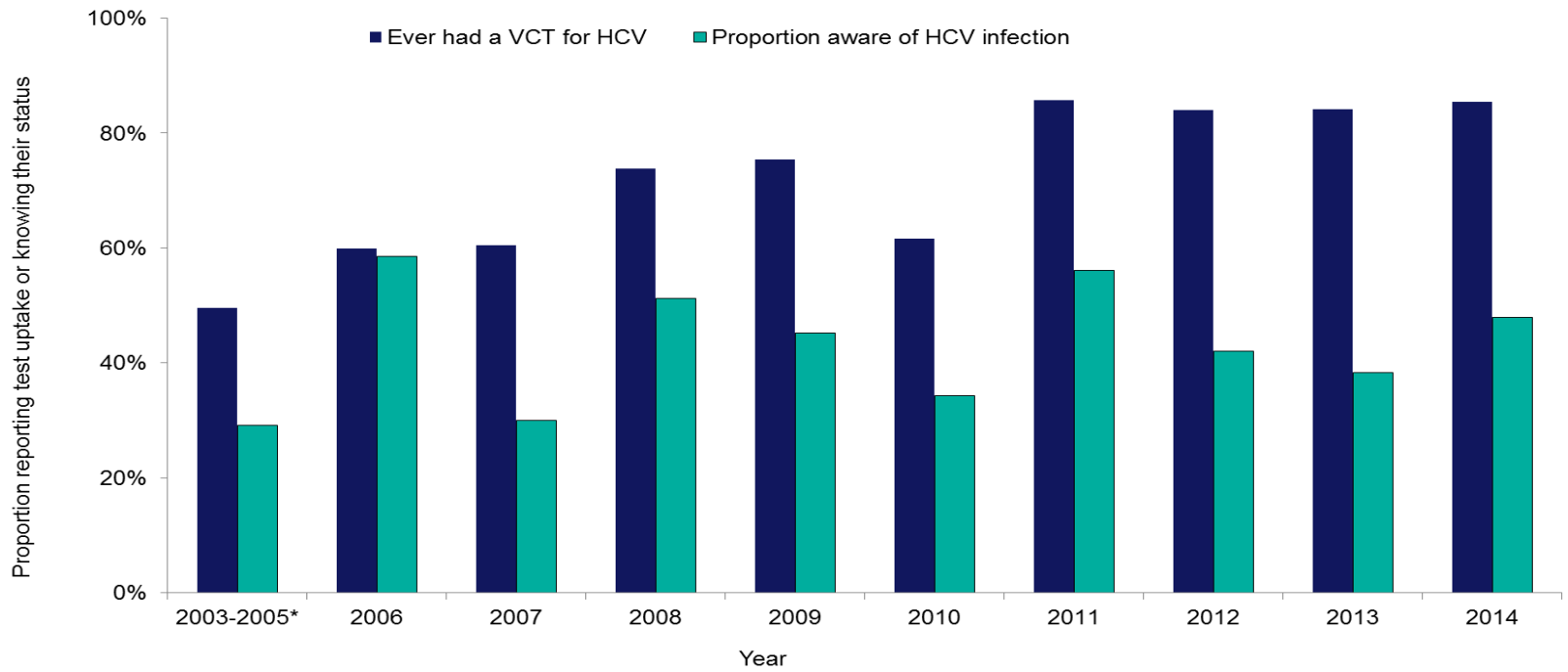


Data source: Unlinked Anonymous Monitoring Survey of people who inject drugs in contact with specialist services.[5]

*HCV VCT uptake in 2002-2003 and 2004 was 79% and 80% respectively; the proportion aware of their HCV infection in 2002 to 2004 was 74%; data are grouped due to small numbers

Public Health England

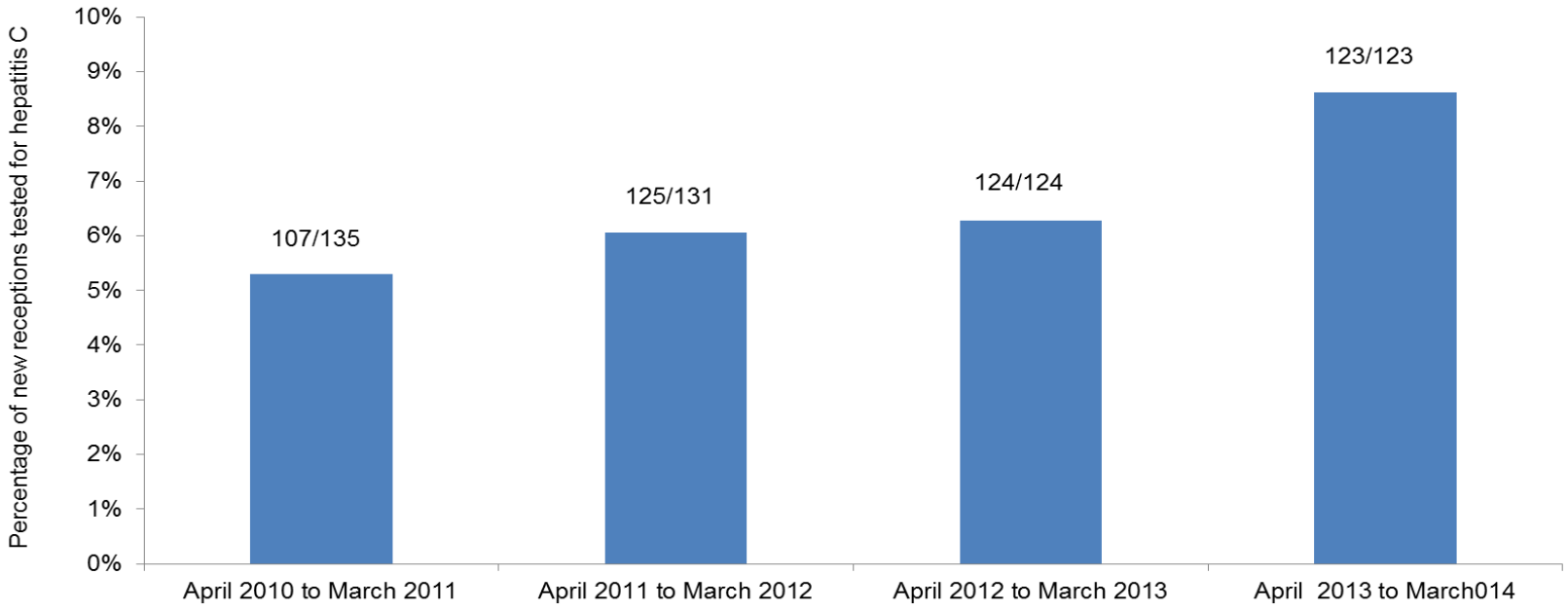
Figure 40. Trends in reported uptake of voluntary confidential testing for HCV infection, and the proportion of those with HCV reporting being aware of their infection in Wales: 2003 to 2014



*Years grouped due to small numbers
Data source: Unlinked Anonymous Monitoring Survey of people who inject drugs in contact with specialist services. [5]

Public Health England

Figure 41. Proportion of new receptions to English prisons tested for hepatitis C: financial years 2010/11 to 2013/14



Figures above bars = number of prisons providing data /total number of prisons (numbers change due to closures)
Data source: Prison Health Performance Quality Indicators (PHPQIs, NHS Trust Development Agency)

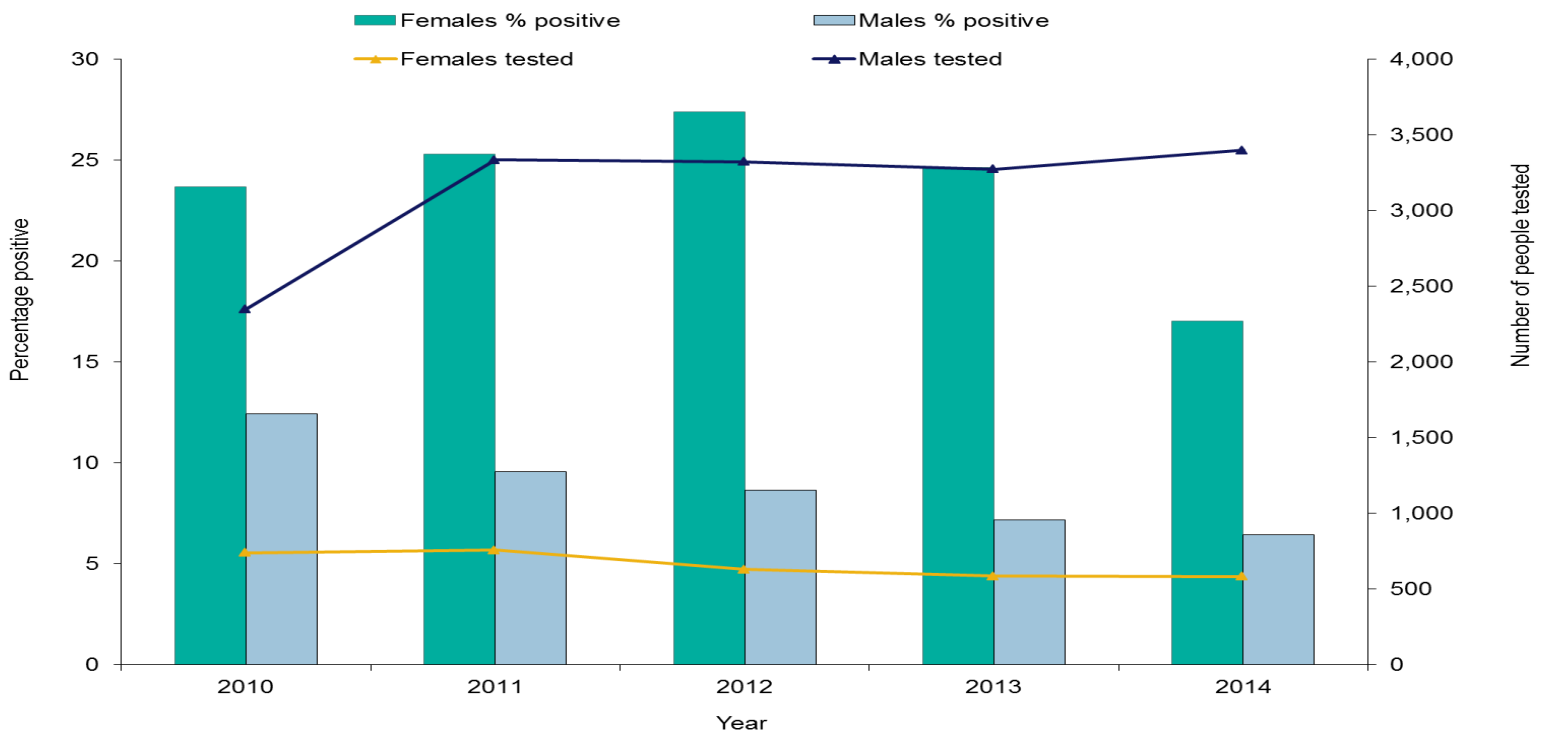
Public Health England

Figure 42. Health and Justice Indicators of performance relating to hepatitis C testing

Hepatitis C testing	Percentage of patients offered hepatitis C testing, within 72hrs of reception
Hepatitis C antibody testing	Percentage of eligible patients who have undertaken an HCV antibody test
Hepatitis C PCR testing	Percentage of HCV antibody positive patients who underwent HCV PCR testing

Public Health England

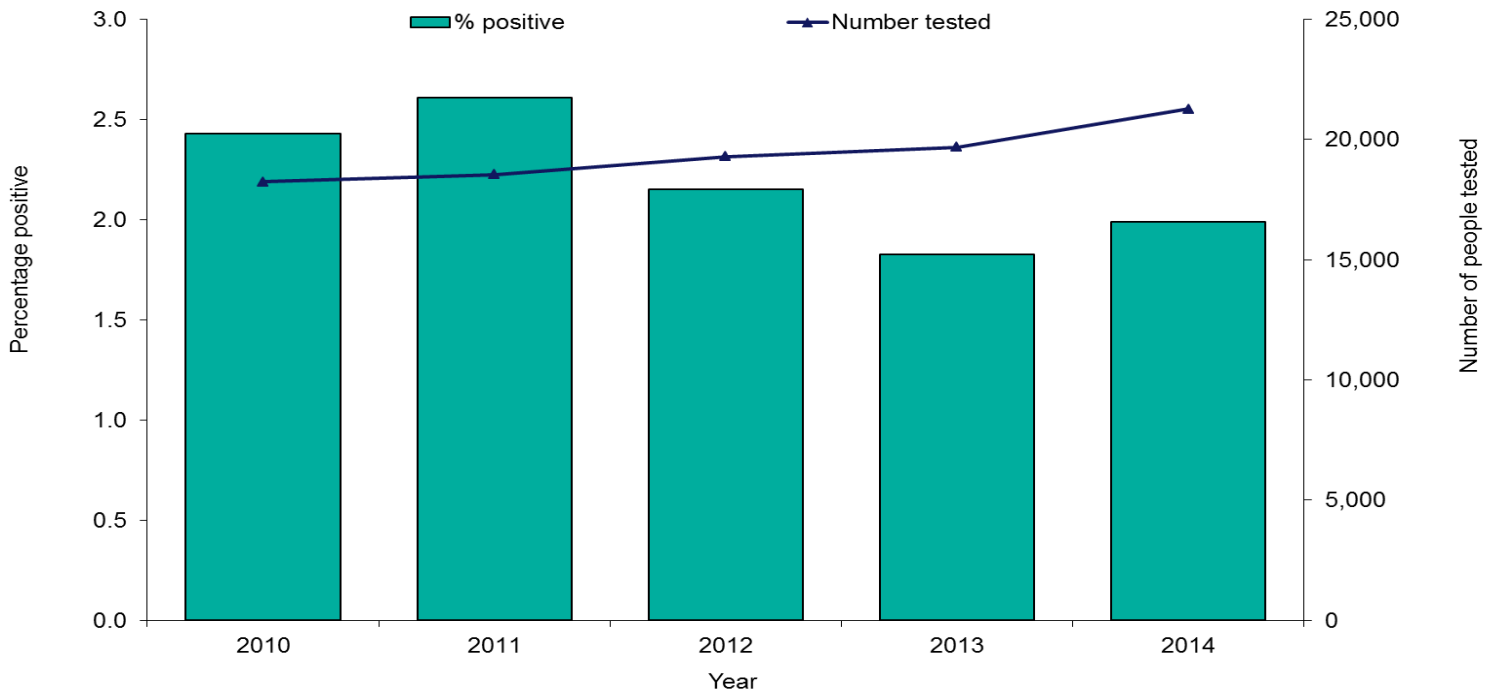
Figure 43. Number of people* tested for anti-HCV, and proportion positive, through prison services by year in 23 sentinel laboratories: 2010 to 2014



Notes: excludes dried blood spot testing, and children aged <1 year.
*534 individuals of unknown gender are not included in these figures.
Data source: Sentinel surveillance of hepatitis blood borne virus testing.

Public Health England

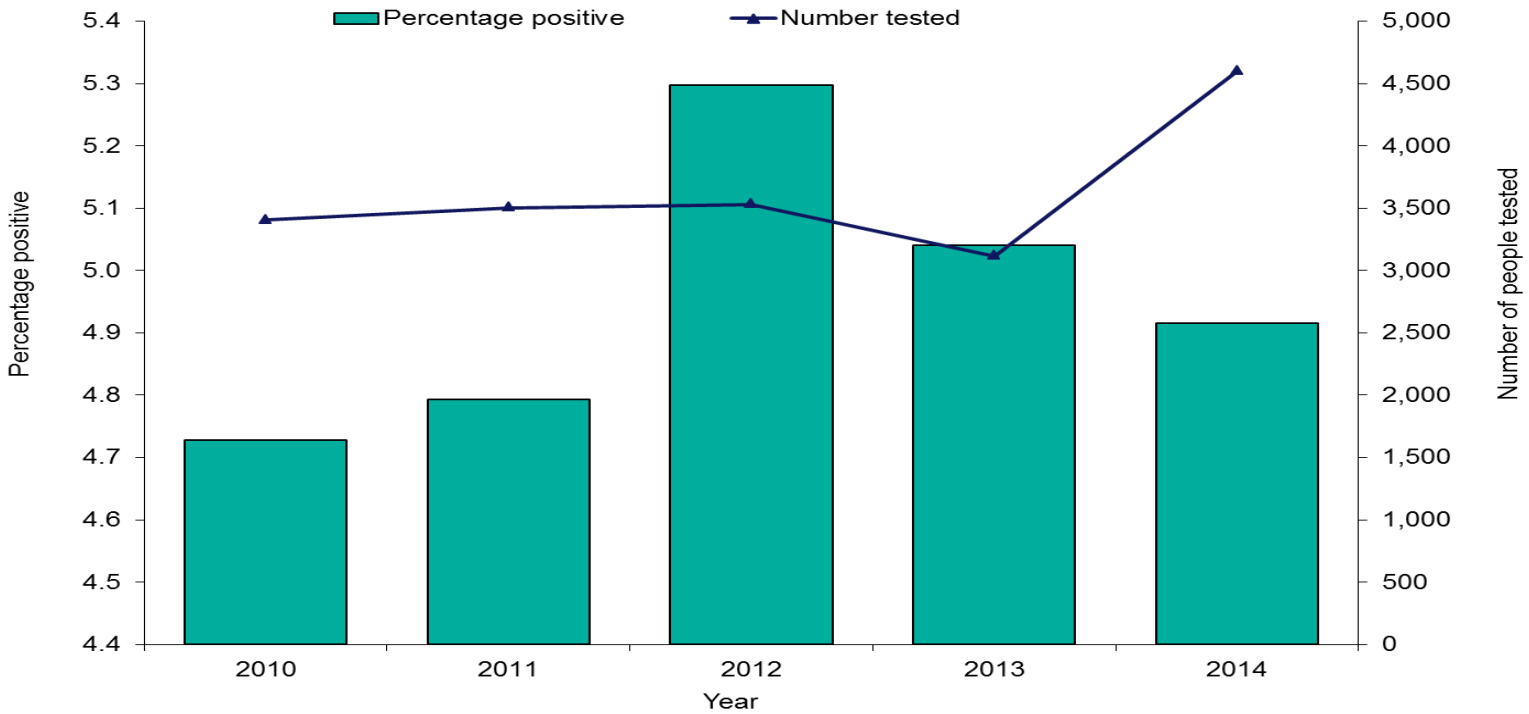
Figure 44. Number of Asian or Asian British people tested, and proportion positive, in 23 sentinel laboratories: 2010 to 2014



Note: Excludes dried blood spot testing, testing from hospitals referring all samples, reference testing, and children aged <1 year.
Data source: Sentinel surveillance of blood borne virus testing.

Public Health England

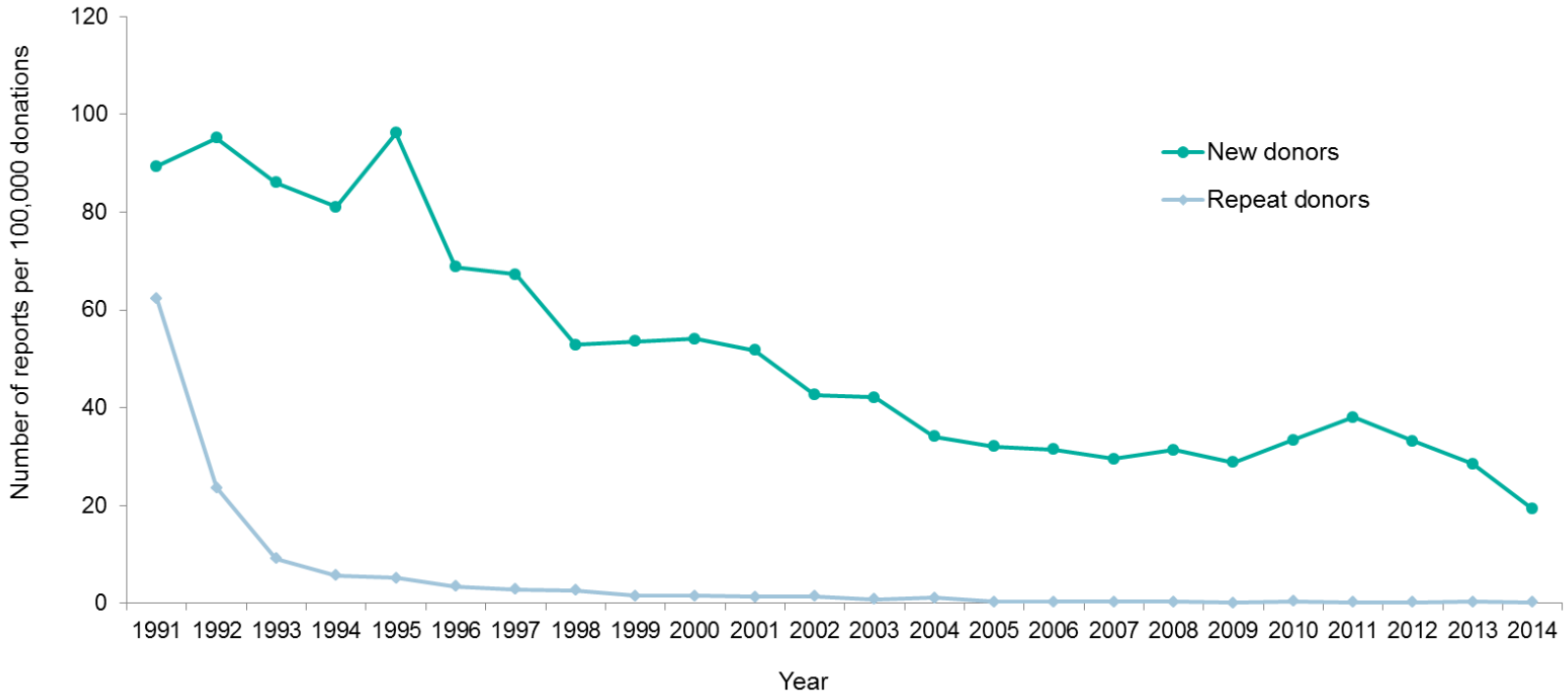
Figure 45. Number of Eastern European people tested, and proportion positive, in 23 sentinel laboratories: 2010 to 2014



Note: Excludes dried blood spot testing, testing from hospitals referring all samples, reference testing, and children aged <1 year.
Data source: Sentinel surveillance of blood borne virus testing.

Public Health England

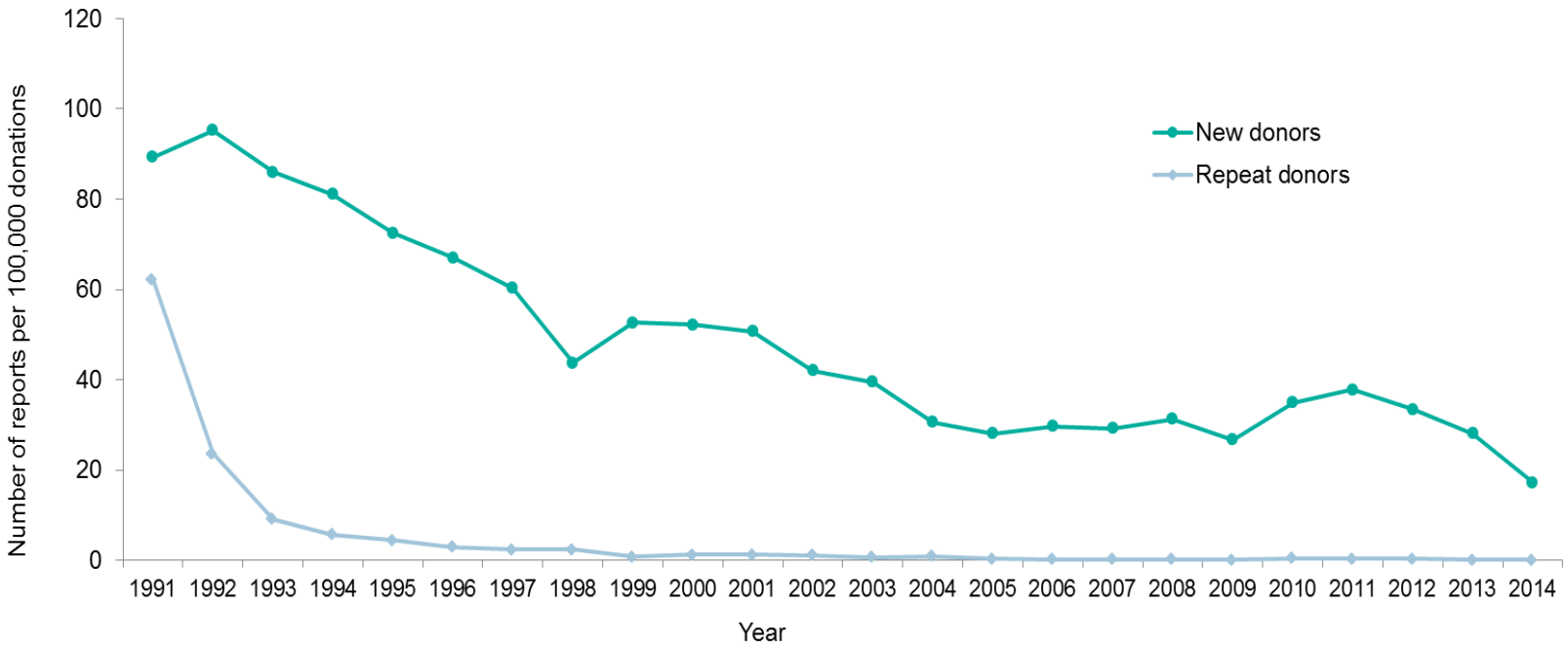
Figure 46. Rate of hepatitis C among donations from new and repeat blood donors in the UK: 1991* to 2014



* September 1991 to December 1994 includes data from England and Wales only.
Data source: NHSBT/PHE Epidemiology Unit using data supplied by SNBTS, WBS and NIBTS from 1995 onwards.

Public Health England

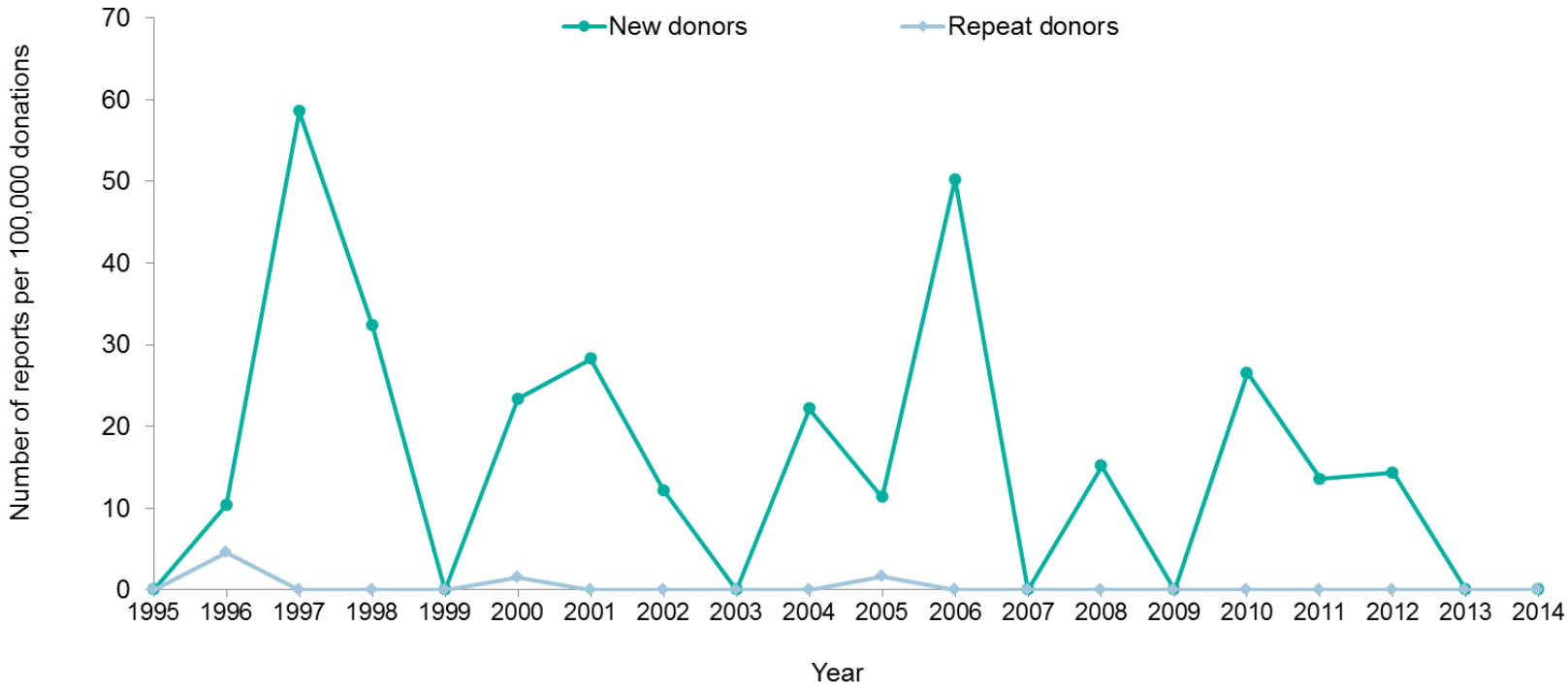
Figure 47. Rate of hepatitis C among donations from new and repeat blood donors in England: 1991* to 2014



Data source: NHSBT/PHE Epidemiology Unit.
*From September 1991
Note: 1991 to 1995 includes Wales, onwards includes North Wales

Public Health England

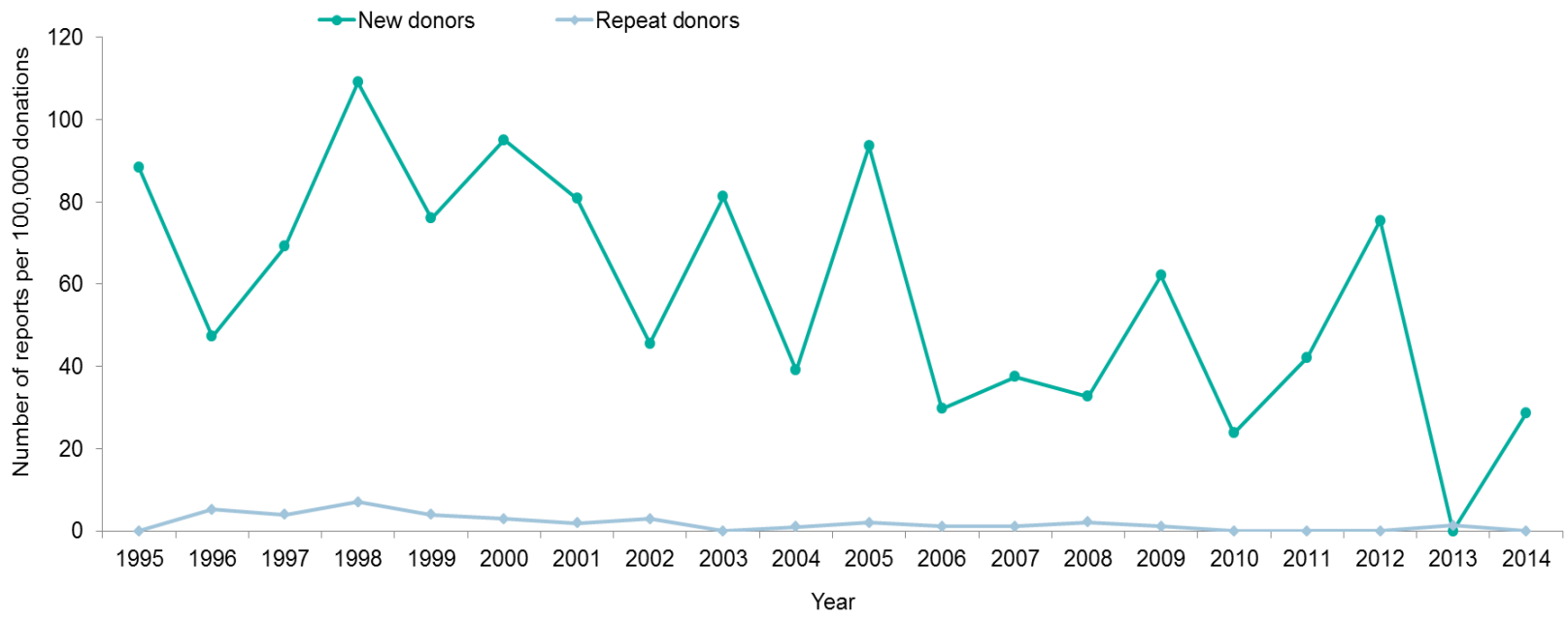
Figure 48. Rate of hepatitis C among donations from new and repeat blood donors in Northern Ireland: 1995 to 2014.



Data source: NHSBT/PHE Epidemiology Unit using data supplied by NIBTS from 1995 onwards.

Public Health England

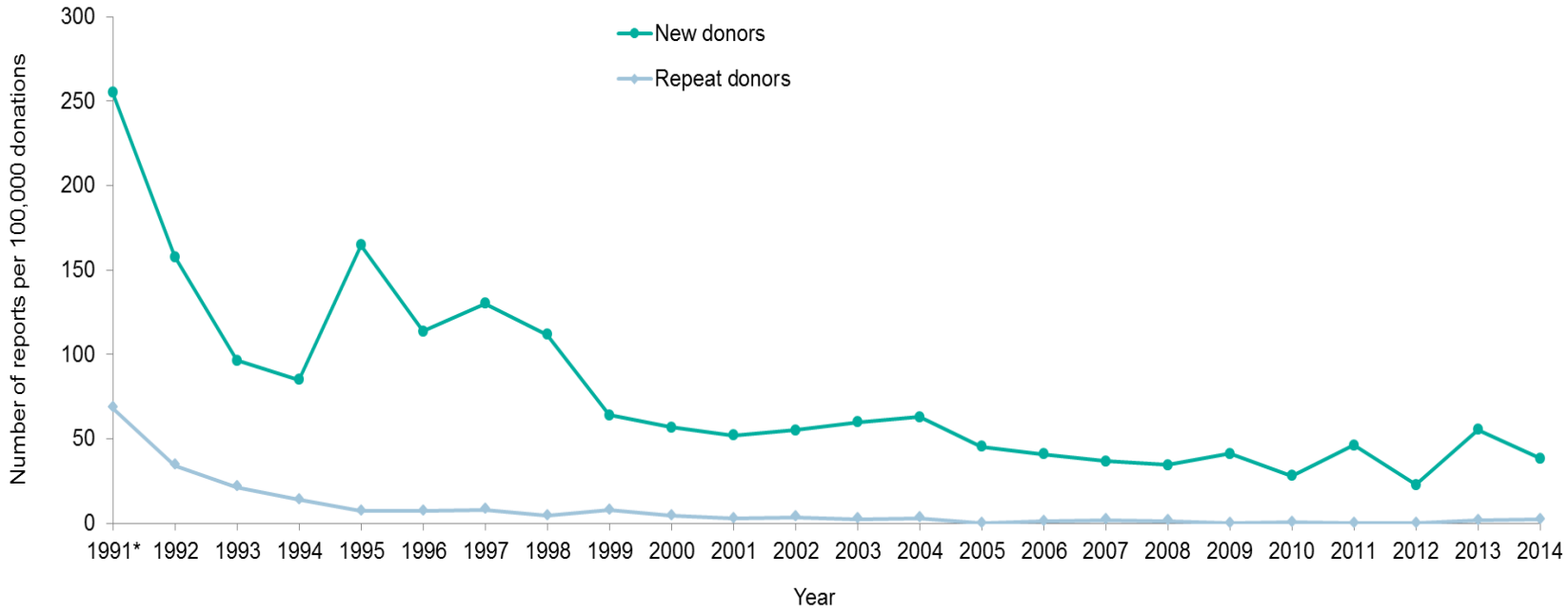
Figure 49. Rate of hepatitis C among donations from new and repeat blood donors in Wales:* 1995 to 2014



Data source: NHSBT/PHE Epidemiology Unit using data supplied by WBS.
* Excluding North Wales

Public Health England

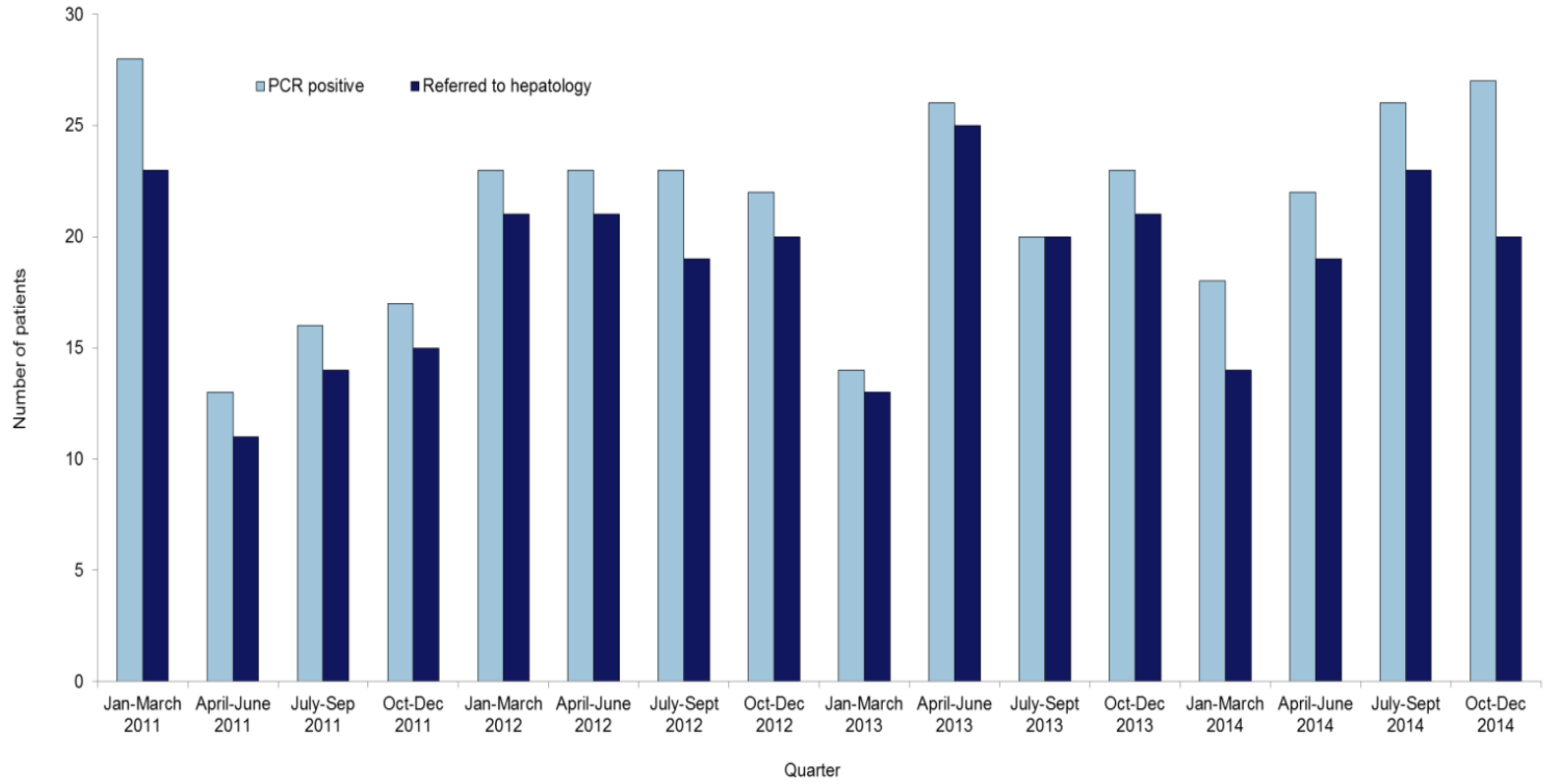
Figure 50. Rate of hepatitis C among donations from new and repeat blood donors in Scotland: 1991* to 2014.



Data source: NHSBT/PHE Epidemiology Unit using data supplied by SNBTS
* 1991 data from September to December 1991

Public Health England

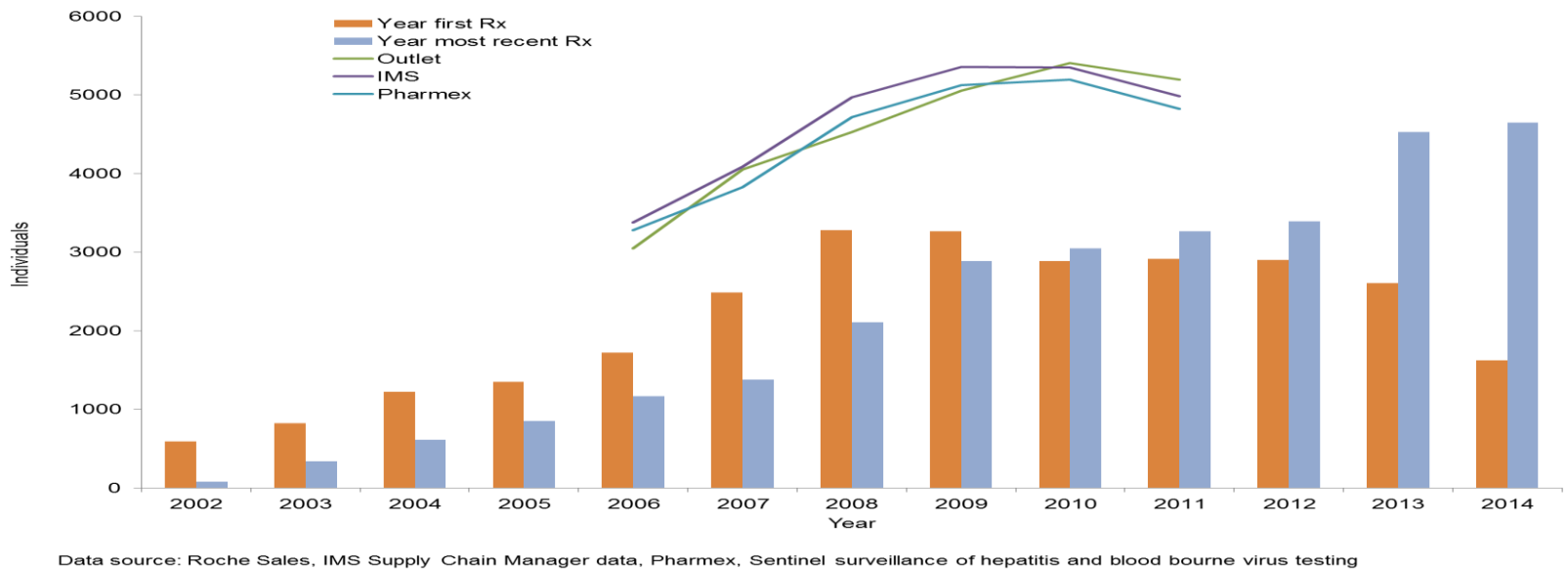
Figure 51. Referral of newly-diagnosed HCV RNA positive patients to hepatology services in Northern Ireland



Data Source: Regional Hepatology Unit, Belfast Hospital and Social Care Trust

Public Health England

Figure 52. Trends in estimated rates of HCV treatment base upon patterns of repeat HCV-RNA testing, by year of first likely treatment event, and most recent treatment event.[1,2]

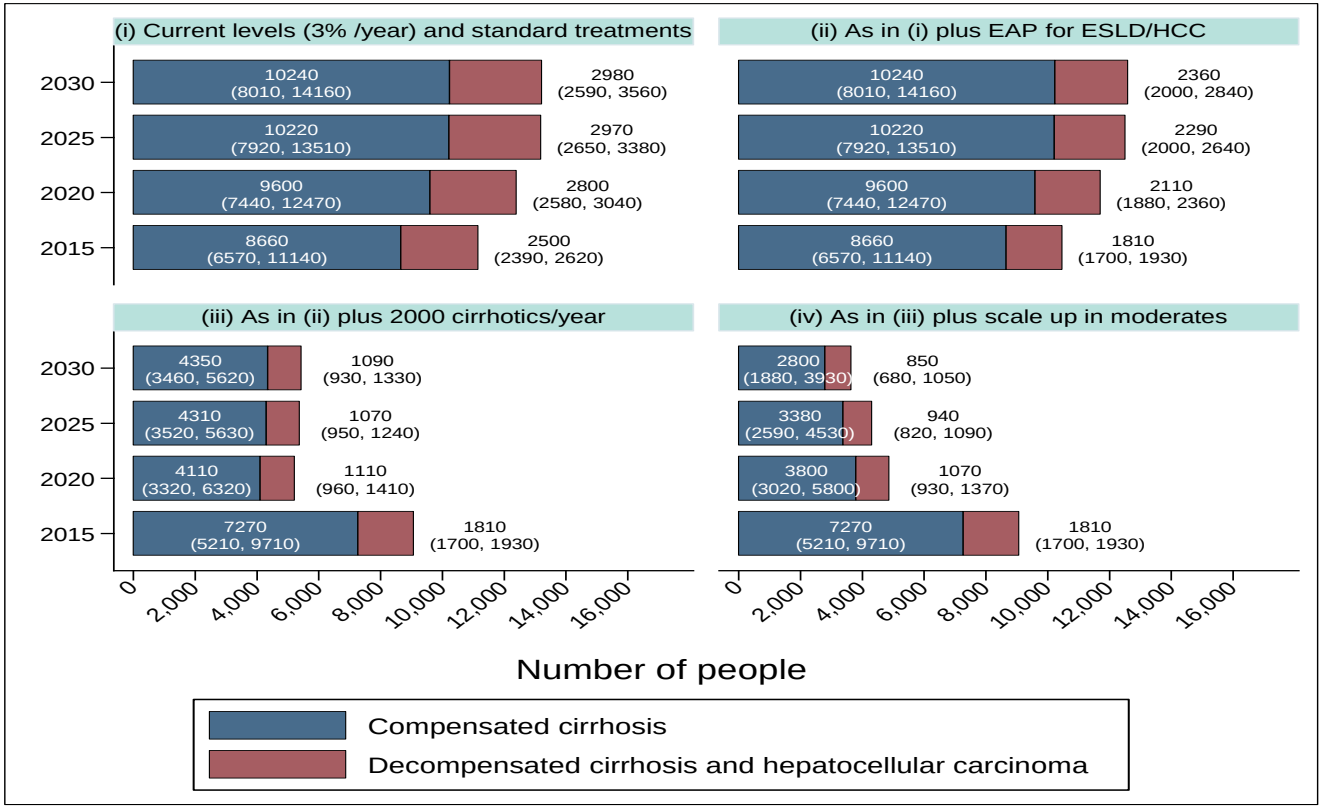


[1]Estimates rely on repeat PCR testing with a 390-day window period. Treatment initiations over the period include first and most recent treatment events. Quality control samples, children aged less than one, those without a positive PCR test result and individuals tested through renal units were excluded from this analysis.

[2]Caveats and Limitations: (i) RNA testing for individuals can only be linked where sufficient patient identifiers accompany the test result, (ii) it is likely that some RNA testing for individuals known to the Sentinel Surveillance system are undertaken by laboratories outside the collaboration and therefore treatment episodes may be missed, (iii) Many individuals are likely to have multiple treatment episodes and although the overall number of individuals treated during the study time frame will not change, their distribution between the study years will. Data are therefore presented by year of first and most recent treatment episodes, (iv) Individuals stopping treatment for any reason, without the required number of RNA tests will be classified erroneously as treatment naïve

Public Health England

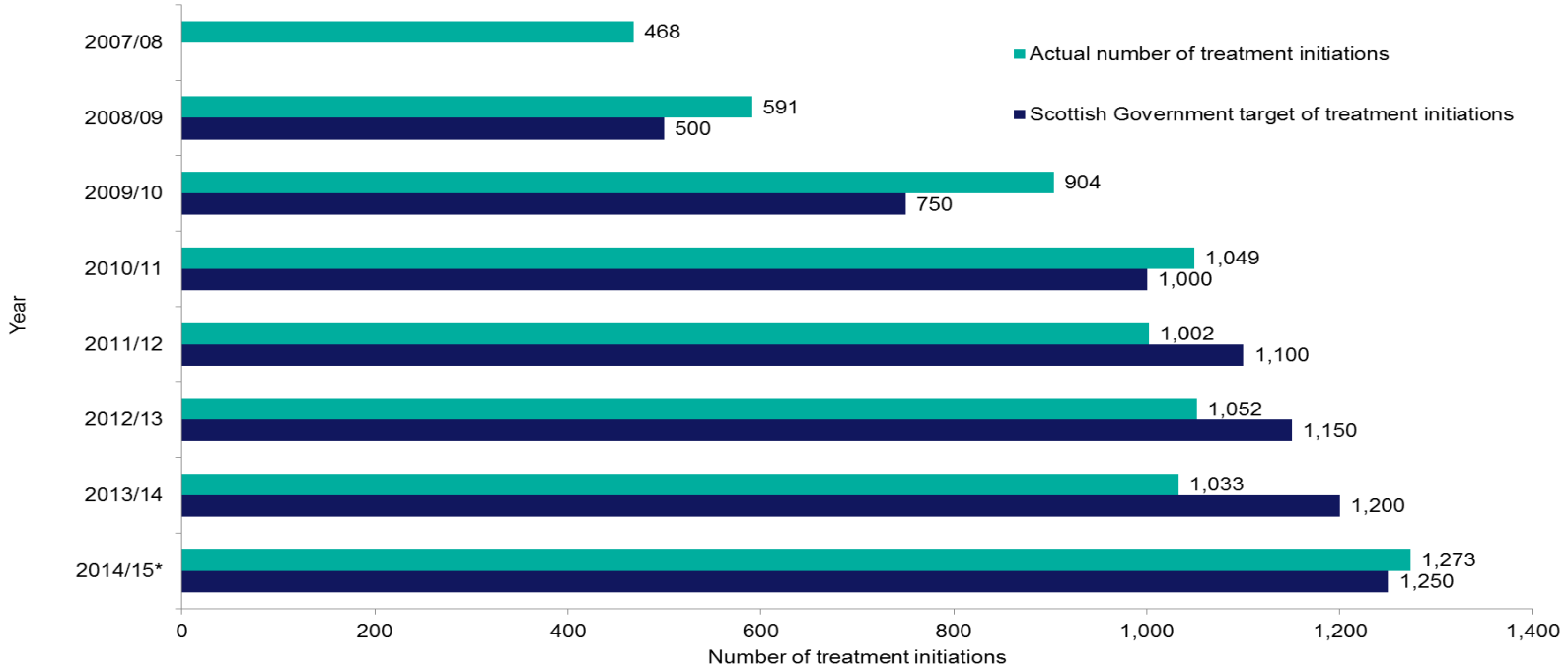
Figure 53. Predicted number of people living with HCV-related cirrhosis or decompensated cirrhosis/HCC in England under different treatment scenarios (95% credible intervals are given in parentheses)



(i) Treatment with pegylated interferon and ribavirin for non-1 genotypes and boceprevir/teleprevir for genotype 1; 2000 mild, 2000 moderate and 500 compensated cirrhosis treated per year, no treatment for ESLD/HCC; (ii) Early Access Programme (EAP) to provide new direct acting antivirals (DAAs) for those with ESLD/HCC, which began in the latter half of 2014 and is assumed to treat 70% of ESLD/HCC patients per year subsequently; (iii) as in (ii), plus 2000 patients with cirrhosis per year (up to a maximum of 70% of the remaining population of cirrhotics per year); (iv) as in (iii), plus a gradual scale up from 1000 to 5000 moderate stage per year from 2016 to 2020.

Public Health England

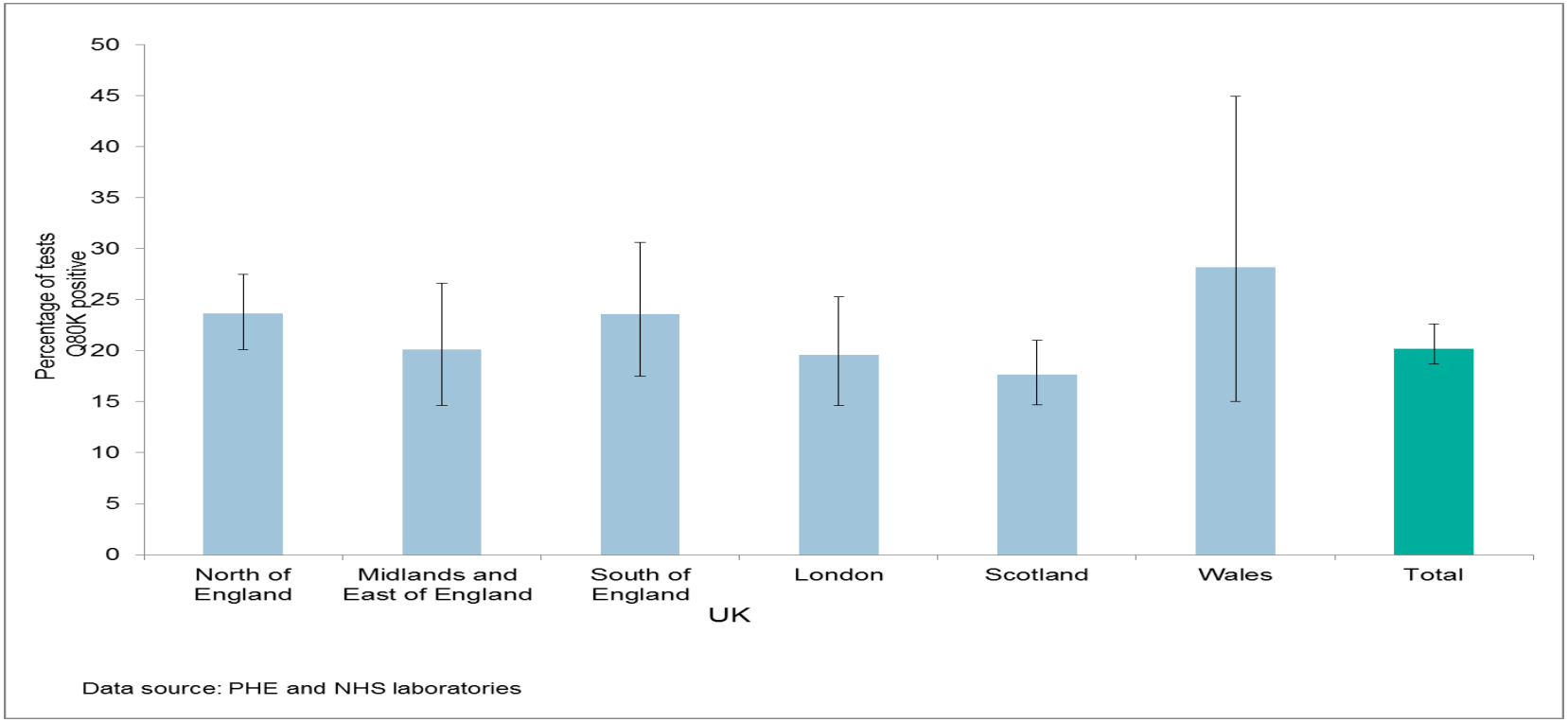
Figure 54. The actual number, and the Scottish government's target, of chronically infected people initiated on hepatitis C antiviral therapy in Scotland for the financial years, 2007/08 to 2014/15*



*Data for 2014/15 are provisional
Data Source: Health Protection Scotland, using data supplied by hepatitis C treatment centres.

Public Health England

Figure 55. Prevalence of Q80K polymorphism in a UK sample* of genotype 1a infection: June 2014 to May 2015



*Based on 1750 genotypic tests for Q80K polymorphism carried out at 11 PHE and NHS laboratories in the UK during the first year of SMV use.

Public Health England

Table 1. Laboratory confirmed cases of chronic hepatitis C in Northern Ireland (n=940) by genotype: 1990 to 2014

Genotype	Number of reports (%)
1	413 (44)
2	64 (7)
3	423 (45)
4	35 (4)
5	2 (0.2)
6	3 (0.3)
Total	**940 (100)**
Data source: NI Regional Virus Laboratory	

Public Health England

Table 2. Risk factor information in laboratory reports* of hepatitis C from England: 1996 to 2014

Risk factor (where reported)	**Number of reports**	**Percentage**
Injecting drug use	16883	90.6
Transfusion	240	1.3
Blood product recipient	132	0.7
Sexual exposure	188	1.0
Renal failure	74	0.4
Vertical (mother to baby) or Household	42	0.2
Occupational	17	0.1
Other	1060	5.7
TOTAL	**18636**	**100**
Data source: CoSurv/SGSS		

***Statutory notification by diagnostic laboratories was introduced in October 2010[50], [51]

Public Health England

Table 3. Route of HCV transmission recorded for patients presenting for treatment to Regional Hepatology Unit, Belfast. 1990 to 2014

Route (where recorded)	Number (%)
PWID	610 (53)
Blood/blood products	130 (11)
Sex	48 (4)
Needlestick injury	16 (1)
Tattoo	32 (3)
Overseas healthcare	45 (4)
Mother to baby and household	8 (1)
Other	5 (0.4)
Unknown	253 (22)
TOTAL	**1147(100)**

Data Source: Regional Hepatology Unit, Belfast Hospital and Social Care Trust

Public Health England

Table 4. Enhanced Surveillance of BBV in people who inject drugs in Wales*: 2011 to 2014[70]

Number of years injecting drugs	Number of Individuals tested				Number of Individuals HCV +ve				Prevalence (%)			
	2011	2012	2013	2014	2011	2012	2013	2014	2011	2012	2013	2014
0-2y	113	91	105	99	11	8	17	18	10	9	16	18
3-4y	68	61	67	50	9	9	13	12	13	15	19	24
>=5y	556	363	490	367	198	82	114	116	36	23	23	32
Unknown	8	12	14	22	0	0	1	4	0	0	7	18
Total	**745**	**527**	**676**	**538**	**218**	**99**	**145**	**150**	**29**	**19**	**21**	**28**

Data source: Enhanced Surveillance of BBV in Wales database held by Public Health Wales, CDSC

*If an individual was known to have been tested more than once, the last test within each year was considered.

Public Health England

Table 5. Hospital admissions for end-stage liver disease* or hepatocellular carcinoma in individuals** with hepatitis C in England 1998 to 2014

Year	Individuals** with HCV	Individuals** with HCV-related ESLD	Deaths*** where diagnosis codes described HCV-related ESLD (percentage of individuals with HCV-related ESLD)	Individuals** with HCV-related HCC	Deaths*** where diagnosis codes described HCV-related HCC (percentage of individuals with HCV-related HCC)
1998	4,072	469	110 (23)	105	26 (25)
1999	4,708	489	124 (25)	145	36 (25)
2000	4,635	521	138 (26)	107	23 (21)
2001	5,304	543	149 (27)	137	33 (24)
2002	6,007	574	162 (28)	177	36 (20)
2003	6,563	607	175 (29)	173	46 (27)
2004	7,293	692	199 (29)	201	46 (23)
2005	8,025	868	252 (29)	243	56 (23)
2006	8,460	928	254 (27)	256	62 (24)
2007	8,962	1,029	287 (28)	275	63 (23)
2008	10,091	1,224	290 (24)	339	70 (21)
2009	10,447	1,317	349 (26)	361	71 (20)
2010	11,195	1,413	363 (26)	463	83 (18)
2011	11,616	1,608	349 (22)	519	81 (16)
2012	12,473	1,759	396 (23)	507	86 (17)
2013****	13,720	1,922	442 (23)	573	72 (13)
2014 ****	14,767	2,021	461 (23)	631	109 (17)

Data source: Hospital Episode Statistics (HES), Health and Social Care Information Centre

*Defined by codes for, ascites, bleeding oesophageal varices; hepato-renal syndrome, hepatic encephalopathy or hepatic failure.

**Patient counts are based on the unique patient identifier, HESID. This identifier is derived from a patient's date of birth, postcode, sex, local patient identifier and NHS number, using a standard algorithm. Where data are incomplete, HESID might wrongly link episodes or fail to recognise episodes for the same patient. Care is therefore needed, especially where the data includes duplicate records. Patient counts must not be summed across a table where patients may have episodes in more than one cell.

***Hospital Episode Statistics data cannot be used to determine the cause of death of a patient while in hospital. Deaths recorded on the Hospital Episode Statistics database may be analysed by the main diagnosis for which the patient was being treated during their stay in hospital, which may not necessarily be the underlying cause of death. For example, a patient admitted for a hernia operation (with a primary diagnosis of hernia) may die from an unrelated a heart attack. The Office for National Statistics collects information on the cause of death, wherever it occurs, based on the death certificate and should be the source of data for analyses on cause of death.

****Hospital Episode Statistics (HES) data for 2013 and 2014 were analysed using the HES Data Interrogation System (HDIS). HDIS is a remotely accessed secure data portal provided and hosted by the Health and Social Care Information Centre (HSCIC) for the purposes of analysing HES data in a secure environment.

Public Health England

Table 6. Hospital admissions* of patients with hepatitis C-related HCC or ESLD to Northern Ireland Hospitals 2000 to 2014[P]

		2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014[P]
Individuals admitted with HCV	Admissions*	88	91	81	105	90	111	120	108	131	146	126	205	375	378	292
	Individuals	68	68	59	66	75	96	98	90	91	97	86	111	133	131	150
	Beddays	452	742	460	404	797	670	988	681	657	1315	647	906	891	855	1270
Individuals with HCV related ESLD	Admissions*							11	6	29	22	18	25	11	31	43
	Beddays	14	27	78	47	69	50	196	70	88	134	114	216	97	167	195
Individuals with HCV related HCC	Admissions*								6	10	11	14	15	17	36	24
	Beddays			22	12	28	91	16	27	70	83	87	58	69	169	120
Individuals with HCV and either ESLD or HCC	Admissions*							14	12	38	32	26	39	28	56	66
	Individuals							8	8	9	9	9	16	14	21	23
	Beddays	14	31	100	59	79	141	212	97	145	206	157	267	166	309	284

Data source: Hospital Inpatient System

[P]Data for 2014 are provisional and, as such, are subject to change

*Admissions have been estimated using deaths and discharges

Disclosure control has been applied

Public Health England

Table 7. Number of Welsh residents[1] with hepatitis C who have ESLD and/or HCC and have died from these conditions, in Wales 1998 to 2014[4]

	Number of patients[2] with HCV	Number of patients[2] with HCV related ESLD	Deaths from HCV[3] related ESLD	Number of patients[2] with HCV related HCC	Deaths from HCV[3] related HCC
Year	Total	Total	Total (%)	Total	Total (%)
1999-2002	921	47	20(43)	14	6(43)
2003-2006	1236	106	21(20)	16	8(50)
2007-2010	1322	144	40(28)	39	7(18)
2011-2014	1584	220	66(30)	72	13(18)
Data source: Patient Episode Database for Wales (PEDW). NHS Wales Informatics Service.					

1. Data based on patients resident in Wales, admitted to providers in Wales or England. Admissions to non-NHS providers are not included.
2. Count of distinct patients per year. If a patient is admitted twice within the same year, they are counted once only. Patients admitted in two years are counted once in each relevant year
3. Deaths based on deaths in hospital. Deaths that occur elsewhere are not included in the analysis.
4. Data may be subject to change, as further data submissions may be received.

Public Health England

Table 8. Number of first registrations for a liver transplant where post-hepatitis C cirrhosis was given as either primary, secondary or tertiary indications for transplant England by PHE centres: 2000 to 2014*

Number of first registrations** for a liver transplant in England where post-hepatitis C cirrhosis was given as either the primary, secondary or tertiary indication for transplant				
PHE Centre (by patient residence)	**2000-2004**	**2005-2009**	**2010-2014**	**Total**
East Midlands	17	20	38	75
East of England	46	38	74	158
London	120	121	143	384
North East	12	12	20	44
North West	36	54	109	199
South East	49	74	103	226
South West	29	35	74	138
West Midlands	24	52	57	133
Yorkshire and Humber	14	35	70	119
Total	**347**	**441**	**688**	**1476**
* These figures are based on registry data as at 9 April 2015				
Data source: NHS Blood and Transplant UK Transplant Registry				

New national registration criteria for selecting adult patients for elective liver transplantation were introduced in September 2007[40]

Public Health England

Table 9. Indications for liver transplants undertaken in HCV infected individuals in England: 1996 to 2014*

		First liver transplants with post hepatitis C cirrhosis as either the primary, secondary or tertiary indication for transplant at registration who were HCV positive at registration or transplant (per cent of all liver transplants)			
Year	All Liver Transplants**	Total	Post-hep C Cirrhosis	Hepatocellular carcinoma	Other Indication
1996	445	43 (10%)	32 (7%)	7 (2%)	4 (1%)
1997	484	57 (12%)	44 (9%)	10 (2%)	3 (1%)
1998	455	47 (10%)	31 (7%)	9 (2%)	7 (2%)
1999	493	76 (15%)	51 (10%)	19 (4%)	6 (1%)
2000	477	66 (14%)	34 (7%)	22 (5%)	10 (2%)
2001	482	68 (14%)	44 (9%)	20 (4%)	4 (1%)
2002	518	83 (16%)	49 (9%)	28 (5%)	6 (1%)
2003	475	74 (16%)	47 (10%)	21 (4%)	6 (1%)
2004	545	82 (15%)	57 (10%)	22 (4%)	3 (1%)
2005	469	55 (12%)	29 (6%)	21 (4%)	5 (1%)
2006	493	60 (12%)	31 (6%)	25 (5%)	4 (1%)
2007	496	65 (13%)	30 (6%)	28 (6%)	7 (1%)
2008	537	112 (21%)	57 (11%)	51 (9%)	4 (1%)
2009	523	93 (18%)	40 (8%)	50 (10%)	3 (1%)
2010	549	96 (17%)	45 (8%)	50 (9%)	1 (0%)
2011	573	104 (18%)	49 (9%)	54 (9%)	1 (0%)
2012	621	103 (17%)	52 (8%)	49 (8%)	2 (0%)
2013	718	125 (17%)	63 (9%)	57 (8%)	5 (1%)
2014	726	122 (17%)	59 (8%)	61 (8%)	2 (0%)
TOTAL	10079	1531 (15%)	844 (8%)	604 (6%)	83 (1%)

*These figures are based on registry data as at 9 April 2015

Data source: NHS Blood and Transplant UK Transplant Registry

** Additional transplants undertaken on the same day in a single recipient are excluded (7 transplants in 1996-2014)

New national registration criteria for selecting adult patients for elective liver transplantation were introduced in September 2007[40]

Public Health England

Table 10. Indications for liver transplants undertaken in HCV infected individuals in Northern Ireland and Wales: 1996 to 2014*

		First liver transplants with post hepatitis C cirrhosis as either the primary, secondary or tertiary indication for transplant at registration who were HCV positive at registration or transplant (per cent of all liver transplants)			
Year	All Liver Transplants	Total	Post-hep C Cirrhosis	Hepatocellular carcinoma	Other Indication
1996	31	1 (3%)	1 (3%)	0 (0%)	0 (0%)
1997	42	1 (2%)	1 (2%)	0 (0%)	0 (0%)
1998	45	3 (7%)	3 (7%)	0 (0%)	0 (0%)
1999	45	6 (13%)	5 (11%)	1 (2%)	0 (0%)
2000	35	4 (11%)	2 (6%)	1 (3%)	1 (3%)
2001	43	1 (2%)	0 (0%)	1 (2%)	0 (0%)
2002	46	4 (9%)	3 (7%)	1 (2%)	0 (0%)
2003	31	3 (10%)	1 (3%)	0 (0%)	2 (6%)
2004	48	3 (6%)	2 (4%)	1 (2%)	0 (0%)
2005	24	1 (4%)	1 (4%)	0 (0%)	0 (0%)
2006	39	8 (21%)	4 (10%)	4 (10%)	0 (0%)
2007	50	6 (12%)	5 (10%)	1 (2%)	0 (0%)
2008	52	8 (15%)	4 (8%)	3 (6%)	1 (2%)
2009	39	10 (26%)	7 (18%)	3 (8%)	0 (0%)
2010	40	5 (13%)	2 (5%)	3 (8%)	0 (0%)
2011	51	3 (6%)	1 (2%)	2 (4%)	0 (0%)
2012	56	3 (5%)	2 (4%)	1 (2%)	0 (0%)
2013	47	8 (17%)	3 (6%)	5 (11%)	0 (0%)
2014	61	7 (11%)	2 (3%)	4 (7%)	1 (2%)
TOTAL	**825**	**85 (10%)**	**49 (6%)**	**31 (4%)**	**5 (1%)**

*These figures are based on registry data as at 9 April 2015

Data source: NHS Blood and Transplant UK Transplant Registry

New national registration criteria for selecting adult patients for elective liver transplantation were introduced in September 2007[40]

Public Health England

Table 11. Indications for liver transplant undertaken in HCV infected individuals in Scotland: 1996 to 2014*

		First liver transplants with post hepatitis C cirrhosis as either the primary, secondary or tertiary indication for transplant at registration who were HCV positive at registration or transplant (per cent of all liver transplants)			
Year	All Liver Transplants	Total	Post-hep C Cirrhosis	Hepatocellular carcinoma	Other Indication
1996	44	5 (11%)	4 (9%)	0 (0%)	1 (2%)
1997	40	4 (10%)	2 (5%)	0 (0%)	2 (5%)
1998	54	7 (13%)	3 (6%)	2 (4%)	2 (4%)
1999	54	4 (7%)	1 (2%)	2 (4%)	1 (2%)
2000	58	7 (12%)	4 (7%)	1 (2%)	2 (3%)
2001	56	7 (13%)	3 (5%)	3 (5%)	1 (2%)
2002	59	5 (8%)	4 (7%)	1 (2%)	0 (0%)
2003	52	4 (8%)	1 (2%)	2 (4%)	1 (2%)
2004	55	6 (11%)	3 (5%)	3 (5%)	0 (0%)
2005	60	10 (17%)	9 (15%)	1 (2%)	0 (0%)
2006	64	6 (9%)	4 (6%)	1 (2%)	1 (2%)
2007	55	8 (15%)	5 (9%)	3 (5%)	0 (0%)
2008	78	12 (15%)	5 (6%)	7 (9%)	0 (0%)
2009	76	6 (8%)	3 (4%)	3 (4%)	0 (0%)
2010	85	19 (22%)	10 (12%)	9 (11%)	0 (0%)
2011	95	10 (11%)	5 (5%)	5 (5%)	0 (0%)
2012	96	11 (11%)	5 (5%)	5 (5%)	1 (1%)
2013	99	21 (21%)	9 (9%)	11 (11%)	1 (1%)
2014	115	24 (21%)	8 (7%)	12 (10%)	4 (3%)
TOTAL	1295	176 (14%)	88 (7%)	71 (5%)	17 (1%)

*These figures are based on registry data as at 9 April 2015

Data source: NHS Blood and Transplant UK Transplant Registry

New national registration criteria for selecting adult patients for elective liver transplantation were introduced in September 2007[40]

Public Health England

Table 12. Injecting* status of adults in drug treatment 2005/06 to 2013/14 in England

Injecting status of adults in drug treatment																
Injecting status	2006-2007		2007-2008		2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014	
	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting
Currently injecting	54,570	18,589	57,500	18,524	59,923	18,421	56,419	14,892	53,853	12,850	50,972	11,928	49,195	11,591	48,268	11,990
Previously injected	42,510	16,976	48,124	18,413	54,371	20,415	58,161	20,448	61,002	19,719	60,967	18,268	60,201	17,949	59,402	17,548
Total ever injected	97,080	35,565	105,624	36,937	114,294	38,836	114,580	35,340	114,855	32,569	111,939	30,196	109,396	29,540	107,670	29,538

Data source: National Drug Treatment Monitoring System

*This table shows the number of people who have injected drugs where a person is classed as ever having injected if they are currently injecting or have previously injected. If a person has been classified as ‘currently injecting’ and ‘previously injecting’ they are assumed to be ‘currently injecting’. For all in treatment, clients who reported as ‘currently injecting’ when they entered treatment over the years may have ceased to inject during the reporting period. ‘Newly presenting’ refers to a person starting a new treatment journey in the financial year.

Public Health England

Table 13. Number of injecting paraphernalia items (rounded to nearest 1,000) reported to have been distributed by injection equipment provider outlets in Scotland

	2004/05	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	2013/14
Needles/syringes	3,554,000	4,438,000	4,381,000	4,681,000	4,506,000	4,723,000*	4,358,000*	4,475,000*
Filters	NA	NA	356,000	2,224,000	2,500,000	2,534,000	2,565,000	2,864,000
Spoons/Cookers	NA	NA	509,000	2,143,000	2,438,000	2,527,000	2,508,000	2,810,000
Water	NA	NA	62,000	77,000	72,000	69,000	249,000	1,019,000

*Estimated, accounting for under-reporting

Data source: Information Services Division, NHS National Services Scotland.

Public Health England

Table 14. Numbers participating in the RCGP Certificate in the detection and diagnosis of hepatitis B and C in primary care (up until December 2014)

Region	Level 1 components						Level 1			Level 2		
	E-module			Face-to-Face training			Both components completed					
	By end of 2012	2013	2014	By end of 2012	2013	2014	By end of 2012	2013	2014	By end of 2012	2013	2014
EAST OF ENGLAND	41	45	14	0	0	1	0	0	1	0	0	0
EAST MIDLANDS	38	40	8	23	15	1	17	11		2	0	0
LONDON	104	79	55	21	65	11	20	63	3	2	0	0
NORTH EAST	33	13	11	28	0	4	13	0	2	0	0	0
NORTH WEST	113	82	46	88	33	5	75	29	4	6	0	0
SOUTH EAST	65	64	53	45	0	20	29	0	10	2	0	0
SOUTH WEST	56	43	33	42	0	3	23	0	2	2	0	0
WEST MIDLANDS	70	77	65	40	10	7	31	9	3	7	0	0
YORKSHIRE & THE HUMBER	82	62	34	44	14	3	39	14	2	6	0	0
NORTHERN IRELAND	4	5	2	0	0	0	0	0		0	0	0
REPUBLIC OF IRELAND	0	4	0	0	0	0	0	0	0	0	0	0
SCOTLAND	45	105	67	3	153	Not available	3	153	Not available	2	Not available	Not available
WALES	66	14	27	68	20	30	66	20	18*	2	0	0
INTERNATIONAL	0	22	17	0	0	1	0	0	1	0	0	0
UNKNOWN	10	2	540	0	0	1	0	0	0	0	0	0
Total	**727**	**657**	**972**	**402**	**310**	**87**	**316**	**299**	**46**	**31**	**Not Applicable**	**Not Applicable**

*provisional data

Data source: Royal College of General Practitioners

Public Health England

Table 15. Laboratory reports* of hepatitis C by Public Health England Centre** (PHEC): 1996 to 2014

PHEC	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	Total
East Midlands	41	182	179	197	184	147	248	340	409	503	310	425	643	610	519	677	690	552	609	7,465
East of England	103	394	581	592	570	438	360	429	524	591	633	671	735	669	600	837	745	701	761	10,934
London	158	253	333	299	264	319	338	404	743	805	1190	1016	962	856	967	2010	2787	3085	3838	20,627
North East	41	40	58	111	130	116	133	223	238	279	245	141	167	275	316	310	301	360	303	3,787
North West	136	124	650	1057	903	1072	1383	2019	1860	1505	1380	1737	1665	2117	1807	1514	1797	1981	1494	26,201
South East	170	632	874	786	610	587	538	448	388	325	377	786	1083	1144	1168	1298	1294	1124	1328	14,960
South West	87	483	449	713	855	726	847	703	941	695	873	1046	1113	1001	733	975	1114	999	966	15,319
West Midlands	111	230	566	628	590	534	645	514	541	572	488	615	675	863	783	778	751	784	659	11,327
Yorkshire and Humber	198	157	142	235	393	236	310	476	581	1016	1449	1361	1344	1091	981	1506	1376	1469	1513	15,834
TOTAL	**1,045**	**2,495**	**3,832**	**4,618**	**4,499**	**4,175**	**4,802**	**5,556**	**6,225**	**6,291**	**6,945**	**7,798**	**8,387**	**8,626**	**7,874**	**9,905**	**10,855**	**11,055**	**11,471**	**126,454**

Data source: CoSurv/SGSS

*****Statutory notification by diagnostic laboratories was introduced in October 2010[50],[51]

** Data are summarised by PHE Centre of residence, not PHE Centre of laboratory. Data are assigned to PHE centre by patient postcode where present; if patient postcode is unknown, data are assigned to PHE centre of registered GP practice; where both patient postcode and registered GP practice are unknown data are assigned to PHE centre of laboratory.

Public Health England

Table 16. HCV RNA status (from testing initial sample) of new cases of hepatitis C reported in Northern Ireland between 2010 and 2014*

	PCR POSITIVE	PCR NEGATIVE	INSUFFICIENT	TOTAL
2010	73	28	5	**106**
2011	76	37	0	**113**
2012	92	40	1	**133**
2013	82	42	0	**124**
2014*	93	45	0	**138**

Data source: Regional Virus Laboratory, Belfast and Social Care Trust

*2014 data is provisional

Public Health England

Table 17. Hepatitis C test status of adults in drug treatment in England - all persons 2006/07 to 2013/14

Hepatitis C test status of adults in drug treatment - all persons																	
		2006-2007		2007-2008		2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-14	
Hepatitis C test recorded		All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting
Yes	No.	35,096	15,143	57,929	22,378	75,668	27,690	93,162	31,629	105,380	32,397	113,131	34,211	116,250	34,787	118,245	34,826
	%	18.1%	18.9%	28.8%	27.2%	35.9%	32.8%	45.0%	39.9%	51.5%	43.8%	57.4%	49.3%	60.1%	50.2%	61.2%	49.1%
No	No.	159,077	65,079	142,876	59,957	135,147	56,830	113,727	47,626	99,093	41,631	83,979	35,223	77,325	34,460	74,953	36,104
	%	81.9%	81.1%	71.2%	72.8%	64.1%	67.2%	55.0%	60.1%	48.5%	56.2%	42.6%	50.7%	39.9%	49.8%	38.8%	50.9%
Total		**194,173**	**80,222**	**200,805**	**82,335**	**210,815**	**84,520**	**206,889**	**79,255**	**204,473**	**74,028**	**197,110**	**69,434**	**193,575**	**69,247**	**193,198**	**70,930**

Data source: National Drug Treatment Monitoring System

Public Health England

Table 18. Hepatitis C test status of adults in drug treatment in England - those who have ever injected* 2006/07 to 2013/14

Hepatitis C test status of adults in drug treatment - currently injecting* or previously injecting* only																	
		2006-2007		2007-2008		2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014	
Hepatitis C test recorded		All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting
Yes	No.	26,611	10,903	41,743	144,14	54,507	17,917	66,130	19,575	73,942	19,532	79,052	20,390	80,817	20516	81,650	20322
	%	27.4%	30.7%	39.5%	39.0%	47.7%	46.1%	57.7%	55.4%	64.4%	60.0%	70.6%	67.5%	73.9%	69.5%	75.8%	68.8%
No	No.	70,469	24,662	63,881	22,523	59,787	20,919	48,450	15,765	40,913	13,037	32,887	9,806	28,579	9,024	26,020	9,216
	%	72.6%	69.3%	60.5%	61.0%	52.3%	53.9%	42.3%	44.6%	35.6%	40.0%	29.4%	32.5%	26.1%	30.5%	24.2%	31.2%
Total		**97,080**	**35,565**	**105,624**	**36,937**	**114,294**	**38,836**	**114,580**	**35,340**	**114,855**	**32,569**	**111,939**	**30,196**	**109,396**	**29,540**	**107,670**	**29,538**

Data source: National Drug Treatment Monitoring System

*This table shows the number of people who inject drugs where a person is classed as having injected if they have 'currently injecting' or 'previously injecting' listed as their injecting status within their latest treatment journey. If a person has been classified as 'currently injecting' and 'previously injecting' they are assumed to be 'currently injecting'. For all in treatment, clients who reported as 'currently injecting' when they entered treatment over the years may have ceased to inject during the reporting period. 'Newly presenting' refers to a person starting a new treatment journey in the financial year.

Public Health England

Table 19. Hepatitis C intervention status for adults in drug treatment in England- all persons 2006/07 to 2013/14

Hepatitis C intervention status for adults in drug treatment - all persons																	
		2006-2007		2007-2008		2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014	
*Recorded hepatitis C status		All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting
Offered and accepted	No.	2,752	1,405	37,681	23,341	68,804	32,424	91,346	33,872	98,231	31,702	99,458	29,215	97,629	28,023	94,967	26,853
	%	1.4%	1.8%	18.8%	28.3%	32.6%	38.4%	44.2%	42.7%	48.0%	42.8%	50.5%	42.1%	50.4%	40.5%	49.2%	37.9%
Offered and refused	No.	1,878	962	23,531	15,345	42,711	22,080	56,488	25,450	62,199	26,291	62,510	25,853	62,928	26,805	66,320	28,686
	%	1.0%	1.2%	11.7%	18.6%	20.3%	26.1%	27.3%	32.1%	30.4%	35.5%	31.7%	37.2%	32.5%	38.7%	34.3%	40.4%
Assessed as not appropriate to offer	No.	n/a	n/a	n/a	n/a	1,253	614	8,603	6,176	13,287	7,858	15,167	7,923	18,043	8,991	19,173	9,793
	%	-	-	-	-	0.6%	0.7%	4.2%	7.8%	6.5%	10.6%	7.7%	11.4%	9.3%	13.0%	9.9%	13.8%
Not offered	No.	3,193	1,797	22,294	14,014	27,421	13,561	17,843	6,193	10,949	3,447	7,532	2,802	5,810	2,666	5,456	2,745
	%	1.6%	2.2%	11.1%	17.0%	13.0%	16.0%	8.6%	7.8%	5.4%	4.7%	3.8%	4.0%	3.0%	3.8%	2.8%	3.9%
Status recorded	No.	7,823	4,164	83,506	52,700	140,189	68,679	174,280	71,691	184,666	69,298	184,667	65,793	184,410	66,485	185,916	68,077
No recorded status	No.	186,350	76,058	117,299	29,635	70,626	15,841	32,609	7,564	19,807	4,730	12,443	3,641	9,165	2,762	7,282	2,853
	%	96.0%	94.8%	58.4%	36.0%	33.5%	18.7%	15.8%	9.5%	9.7%	6.4%	6.3%	5.2%	4.7%	4.0%	3.8%	4.0%
Total		**194,173**	**80,222**	**200,805**	**82,335**	**210,815**	**84,520**	**206,889**	**79,255**	**204,473**	**74,028**	**197,110**	**69,434**	**193,575**	**69,247**	**193,198**	**70,930**
Data source: National Drug Treatment Monitoring System																	

*Information about whether people have been offered a hepatitis C test is recorded at the beginning of their latest period of treatment.

Public Health England

Table 20. Hepatitis C test status of adults in drug treatment in England - those who have ever injected* 2006/07 to 2013/14

Hepatitis C intervention for adults in drug treatment - currently injecting* or previously injecting* only																	
		2006-2007		2007-2008		2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014	
**Recorded hepatitis C status		All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting	All in treatment	Newly presenting
Offered and accepted	No.	2,060	957	24,386	13,449	44,376	18,258	59,210	18,218	63,603	16,589	65,402	15,449	64,303	14,401	62,561	13,836
	%	2.1%	2.7%	23.1%	36.4%	38.8%	47.0%	51.7%	51.6%	55.4%	50.9%	58.4%	51.2%	58.8%	48.8%	58.1%	46.8%
Offered and refused	No.	1,224	533	11,809	6,409	20,918	8,913	27,431	9,738	29,949	9,915	29,940	9,526	29,982	9,806	30,922	10,177
	%	1.3%	1.5%	11.2%	17.4%	18.3%	23.0%	23.9%	27.6%	26.1%	30.4%	26.7%	31.5%	27.4%	33.2%	28.7%	34.5%
Assessed as not appropriate to offer	No.	n/a	n/a	n/a	n/a	738	323	4,065	2,539	6,190	3,197	7,437	3,242	8,480	3,525	8,766	3,714
	%	-	-	-	-	0.6%	0.8%	3.5%	7.2%	5.4%	9.8%	6.6%	10.7%	7.8%	11.9%	8.1%	12.6%
Not offered	No.	2,076	1,019	11,340	5,832	13,230	5,384	8,471	2,249	5,599	1,306	3,695	976	2,829	1,077	2,564	1,060
	%	2.1%	2.9%	10.7%	15.8%	11.6%	13.9%	7.4%	6.4%	4.9%	4.0%	3.3%	3.2%	2.6%	3.6%	2.4%	3.6%
Status recorded	No.	5,360	2,509	47,535	25,690	79,262	32,878	99,177	32,744	105,341	31,007	106,474	29,193	105,594	28,809	104,813	28,787
No recorded status	No.	91,720	33,056	58,089	11,247	35,032	5,958	15,403	2,596	9,514	1,562	5,465	1,003	3,802	731	2,857	751
	%	94.5%	92.9%	55.0%	30.4%	30.7%	15.3%	13.4%	7.3%	8.3%	4.8%	4.9%	3.3%	3.5%	2.5%	2.7%	2.5%
Total		**97,080**	**35,565**	**105,624**	**36,937**	**114,294**	**38,836**	**114,580**	**35,340**	**114,855**	**32,569**	**111,939**	**30,196**	**109,396**	**29,540**	**107,670**	**29,538**

Data source: National Drug Treatment Monitoring System

*This table shows the number of people who inject drugs where a person is classed as having injected if they have 'currently injecting' or 'previously injecting' listed as their injecting status within their latest treatment journey. If a person has been classified as 'currently injecting' and 'previously injecting' they are assumed to be 'currently injecting'. For all in treatment, clients who reported as 'currently injecting' when they entered treatment over the years may have ceased to inject during the reporting period. 'Newly presenting' refers to a person starting a new treatment journey in the financial year.

**Information about whether people have been offered a hepatitis C test is recorded at the beginning of their latest period of treatment.

Public Health England

Table 21. Hepatitis C results from Dried Blood Spot Testing in Wales: 2011 to 2014

Year	Number of individuals tested by DBS*	Number of individuals first identified as having a reactive result for HCV antibody	Number with a follow-up sample for PCR testing (% of individuals first identified as having a reactive result for HCV antibody)	Number with RNA detected (% of those with a follow-up sample for PCR testing)
2011	1531	298	175 (59%)	134 (77%)
2012	1675	194	118 (61%)	96 (81%)
2013	1874	180	94 (52%)	81 (86%)
2014	1639	186	72 (39%)	52 (72%)

* Samples attributed to Substance Misuse Services and prisons were included

Data source: Virology Specialist Centre, Public Health Wales

Public Health England

Table 22. Number of active PWIDs who have self-reported HCV status in Wales from the Harm Reduction Database: April 2011 to March 2014

Self-reported HCV status recorded	Drug type – reported primary substance used number and percentage of total within 'substance	
	Image and performance enhancing drugs*	Psychoactive drugs**
	April 2014-March 2015	April 2014-March 2015
	Number (%)	Number (%)
Positive	≤5 (≤1)	206 (12)
Negative	691 (43)	1041 (60)
Status Not Known	900 (56)	477 (28)
Not recorded	2786	3621
	April 2013-March 2014	April 2013-March 2014
Positive	≤5 (≤1)	182 (11)
Negative	596 (41)	1036 (65)
Status Not Known	872 (59)	382 (24)
Not recorded	2909	3125
	April 2012-March 2013	April 2012-March 2013
Positive	≤5 (≤1)	186 (13)
Negative	467 (38)	908 (62)
Status Not Known	745 (61)	370 (25)
Not recorded	2974	2460
	April 2011-March 2012	April 2011-March 2012
Positive	≤5 (≤1)	173 (12)
Negative	529 (43)	968 (64)
Status Not Known	706 (57)	360 (24)
Not recorded	3128	2099
Data from Harm Reduction Database, Public Health Wales		

Full Harm Reduction Database Wales reports available at: www.publichealthwales.org/substancemisuse

* steroids, growth hormone, melanotan

** including heroin, cocaine, amphetamine, new psychoactive substances

Public Health England

Table 23. Reports* of hepatitis C in prisons and other places of detention to PHIPS team: 2010 to 2014

Hepatitis C Infection	Year of report				
	2010	2011	2012	2013	2014
Acute hepatitis C	0	<5	0	<5	<5
Hepatitis C antibody positive with no HCV RNA result	106	289	417	735	526
Hepatitis C antibody positive, HCV RNA negative	Not available	Not available	Not available	Not available	63
Hepatitis C HCV RNA positive	9	89	205	670	477
Data source: PHE, PHIPS Service					

*There was a considerable increase in hepatitis C reports during 2013 due to improved reporting and also retrospective reports which accounted for over 300 reports during 2013

Public Health England

Table 24. Hepatitis C testing in the Welsh prison estate: 2013 to 2014

Year	Total tested (n)	DBS tests (n)	Venepuncture tests (n)	Proportion of receptions tested (%)
2013	1255	424	831	13.2
2014	1150	538	612	13.7

Data source: : Prisons in Wales via Public Health Wales

Public Health England

Table 25. Characteristics and probable exposure history of HCV infected blood donors by gender in England and North Wales, 2014

	*New donors				*Repeat donors		Total	
Characteristics of infected donors	Male	Female	Total	%	Total	%		%
Number	15	9	24	*100*	1	*100*	25	*100*
Prevalence per 100 000 donors	27.4	10.9	17.4		0.1		2.7	
Age group								
17-24	1	0	1	*4*	0	*0*	1	*4*
25-34	6	2	8	*33*	0	*0*	8	*32*
35-44	4	2	6	*25*	0	*0*	6	*24*
45 and over	4	5	9	*38*	1	*100*	10	*40*
Ethnic group								
White-British	4	4	8	*33*	1	*100*	9	*36*
Any other white background	7	3	10	*42*	0	*0*	10	*40*
Indian/Pakistani/Bangladeshi	3	0	3	*13*	0	*0*	3	*12*
Mixed	1	1	2	*8*	0	*0*	2	*8*
Ethnicity information not disclosed	0	1	1	*4*	0	*0*	1	*4*
Area of birth								
UK	4	2	6	*25*	1	*100*	7	*28*
Europe excl UK	5	2	7	*29*	0	*0*	7	*28*
Asia	4	0	4	*17*	0	*0*	4	*16*
Africa	0	1	1	*4*	0	*0*	1	*4*
Americas	0	1	1	*4*	0	*0*	1	*4*
Not known	2	3	5	*21*	0	*0*	5	*20*
Probable exposure category								
Injecting drug use	1	0	1	*4*	0	*0*	1	*4*
Intranasal drug use	0	2	2	*8*	0	*0*	2	*8*
Sex between men and women	0	2	2	*8*	1	*100*	3	*12*
Blood contact possible	5	0	5	*21*	0	*0*	5	*20*
Vertical transmission possible	1	0	1	*4*	0	*0*	1	*4*
**Born in an endemic country	2	2	4	*17*	0	*0*	4	*16*
No identified exposure	1	0	1	*4*	0	*0*	1	*4*
Incomplete follow up	5	3	8	*33*	0	*0*	8	*32*

* As classified according to evidence supplied to the NHSBT/PHE Epidemiology Unit

**Born in a country with a higher prevalence of hepatitis C than the UK but no specific risk identifed

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References

A number of figures and tables in this presentation have references cited in the footnotes. These references can be found below.

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