Patient Perspective: ICE-HBV Cure Strategy
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Why ICE-HBV is Important to the Community

• 1st International Coalition to Eliminate (ICE) Hepatitis B Virus (HBV), which has made an HBV Cure a global research priority.

  ➢ ICE-HBV evolved from the International HBV Meeting, an annual scientific meeting coordinated by Hepatitis B Foundation.

• The ICE-HBV Global Scientific Cure Strategy provides a research plan to achieve WHO’s goal to end chronic viral hepatitis by 2030.

  ➢ It includes community stakeholders even at this early stage.
An HBV Cure Is Urgently Needed

• Almost 1 million people living with chronic HBV (CHB) continue to die every year despite 8 approved drugs!

• Current treatments only control the virus – there is NO cure.

• With the current treatment guidelines, only 50% of CHB patients qualify for the approved drugs.

• And the risk of death due to liver disease only drops by 50-70% for those treated with the current oral HBV drugs.

Clearly, we need an HBV Cure to finally eliminate the deadly hep B virus.
HCV Is Curable – Why Isn’t HBV?

• In 2013, the first approved HCV cure was approved.
  • *Today, HCV patients can be cured in as little as 8 weeks.*

• Scientists never thought HCV could be cured.
  • *Today, scientists are now taking a second look at HBV.*

• Key Point: If NIH and pharma invested as much in HBV as they did for HCV, we could also expect a similar miracle.

  Hence, today the expectation for an HBV cure is even greater!
What Would An HBV Cure Cost?

• The potential for eliminating HBV has been established by WHO and the U.S. NASEM reports.

• NIH currently funds HBV at $49 Million per year, but funding has declined 16% since 2012.

• We need the NIH because it has the infrastructure and scientific capacity needed to accelerate the pace of research for HBV.

• In 2018, the Hepatitis B Foundation published its “Roadmap for a Cure” that includes a Professional Judgement Budget for the NIH.
Dollars Equal Concern

• The HBF *Professional Judgement Budget* projects almost a $39 Million average annual increase for the NIH (over the current $49M per year).
  • *Only an additional $234 Million over 6 years through 2023.*

• NIH annually spends $3.2 Billion on HIV/AIDS.

• Additional NIH funds for HBV would support (i) Basic Science Studies and (ii) Translational/Clinical Research.

• Studies would be based on priorities and milestones identified in the *HBF Research Roadmap for a Cure* and the *ICE-HBV Cure Strategy.*
A Cure Could Largely Eliminate HBV By 2030

An HBV Cure will save almost 170,000 lives in the U.S. by 2030

Current level of projected deaths is 188,000 (see column A below)

Table 2: Projected Health Outcomes for 2,000,000 Americans with Chronic HBV by 2030 using Three Levels of Diagnosis and Treatment: Current Level, Substantially Improved, HBV Cure.*

<table>
<thead>
<tr>
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<th>A) Current Level</th>
<th>B) Substantially Improved</th>
<th>C) HBV Cure</th>
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<tbody>
<tr>
<td>Death</td>
<td>188,000</td>
<td>93,210</td>
<td>18,800</td>
</tr>
<tr>
<td>Liver Cancer</td>
<td>120,000</td>
<td>78,204</td>
<td>12,000</td>
</tr>
<tr>
<td>Cirrhosis</td>
<td>206,200</td>
<td>114,088</td>
<td>20,620</td>
</tr>
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*Adapted from NASEM, Toy, 2017

Source: Hepatitis B Foundation’s Research Roadmap for a Cure 2018
Investing In An HBV Cure

The human toll and the economic burden is substantial and the data provides compelling evidence for investing in an HBV cure.

Table 3: Sample Costs Per Patient for Treating Chronic HBV

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<tr>
<td>$739,000</td>
<td>$46,538 (annual) $232,690 (lifetime average)</td>
<td>$8,400-$16,464 (annual)</td>
</tr>
</tbody>
</table>

Source: Hepatitis B Foundation's Research Roadmap for a Cure 2018
Today’s Key Points:

1. Finally, we now have the scientific and technological capability to find a cure;

2. We have the public health mandates from NASEM and WHO;

3. We have the research roadmaps from HBF and ICE-HBV.

NOW WE NEED VOCAL ADVOCACY FROM THE HBV COMMUNITY TO CALL FOR ACTION!
Make Hepatitis B History!!

An HBV Cure would truly free those living with chronic hepatitis B from the burden of disease and the related stigma and discrimination.

Ultimately, together we can make hepatitis B history!

Thank you . . .