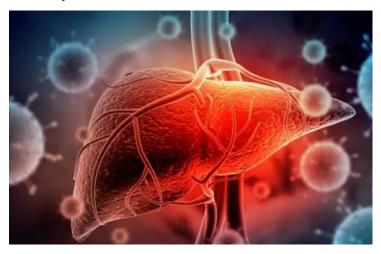


## WHO urges action on hepatitis, announcing hepatitis D as carcinogenic

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## WHO is partnering with Rotary International and the World Hepatitis Alliance to strengthen global and local advocacy



As we mark World Hepatitis Day on 28 July, the World Health Organisation (WHO) calls on governments and partners to urgently accelerate efforts to eliminate viral hepatitis as a public health threat and reduce liver cancer deaths.

Viral hepatitis – types A, B, C, D, and E – are major causes of acute liver infection. Among these only hepatitis B, C, and D can lead to chronic infections that significantly increase the risk of cirrhosis, liver failure, or liver cancer. Yet most people with hepatitis don't know they're infected. Types B, C, and D affect over 300 million people globally and cause more than 1.3 million deaths each year, mainly from liver cirrhosis and cancer.

The International Agency for Research on Cancer (IARC) recently classified hepatitis D as carcinogenic to humans, just like hepatitis B and C. Hepatitis D, which only affects individuals infected with the hepatitis B, is associated with a two- to six-fold higher risk of liver cancer compared to hepatitis B alone. This reclassification marks a critical step in global efforts to raise awareness, improve screening, and expand access to new treatments for hepatitis D.

Treatment with oral medicine can cure hepatitis C within 2 to 3 months and effectively suppress hepatitis B with life-long therapy. Treatment options for hepatitis D are evolving. However, the full benefit of reducing liver cirrhosis and cancer deaths can only be realized through urgent action to scale up and integrate hepatitis services – including vaccination, testing, harm reduction, and treatment – into national health systems.

WHO is partnering with Rotary International and the World Hepatitis Alliance to strengthen global and local advocacy. This year's campaign "Hepatitis: Let's break it down" demands action to confront the rising toll of liver cancer linked to chronic hepatitis infections. It also calls for decisive steps to dismantle persistent barriers – from stigma to funding gaps – that continue to slow progress in prevention, testing, and treatment.