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Viral Hepatitis B and C in prison in France: State of art

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n 18 January 1994, the French law on public health and social protection transformed healthcare for prisoners by widening the scope of the mainstream health system to cover incarcerated populations. Several measures were done for inmates, including screening for common conditions and serious diseases, developing educational and preventative health initiatives, offering the same standard of curative care as in the general population, and ensuring continuity of care upon release. One of the objectives of the 2010-2014 strategic action plan on health policy for people in the criminal justice system was to make organized HCV/HBV screening and treatment more accessible to inmates. Prevalence of viral hepatitis C (and B) is higher in prison environment in France than in the general population and is estimated by the PREVACAR study to be 4,8%. The impact in prison environment is little-known as based only on local studies. There we HCV and HBV contaminations in prison. Inmate health care falls under prison setting medical unit, hospital specific units

Access to antiviral c treatment for inmates has always been difficult in France, would it be for interferon and ribavirin or use of protease inhibitors, with less than 20% of treated patients. French recommendations for HCV screening recommend systematic screening of inmates. The arrival of all oral therapies by direct antiviral agents (DAA) with shorter treatment times was an opportunity for doctors to propose a treatment and the patient to accept it. In 2014, the French guidelines recommended that HCV carriers in prison should systematically be treated independently of the stage of fibrosis. Screening, diagnostic screening and treatment of chronic viral hepatitis is identical but submitted to constraints of prison organization. Efficiency of HCV treatments is identical but an insufficient number of prisoners reached to DAA. Hepatitis B was more difficult to set in charge of fact of prolonged treatments. All hepatologists has to get involved on their practice, in partnership with the medical teams of the sanitary units.

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