

### 1150. The Disease Burden of Chronic Hepatitis C in Turkey

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**Background.** Hepatitis C virus (HCV) disease burden and the impact of new potent direct acting antivirals (DAAs) in Turkey are currently unknown. We examined HCV-related disease progression to quantify the burden of disease from a Turkish perspective.

**Methods.** Using a modeling approach, we quantified the HCV-infected population and associated disease progression through 2030. The HCV-infested population was characterized using published literature, Turkish government reports including year-end 2013 and estimates from a panel of country experts. We developed three treatment strategies to analyze the changes in burden of HCV infection: treatment of patients >F3

with new DAAs (restricted treatment), treatment of all patients with new DAAs (unrestricted treatment) and increased diagnosis and treatment for the elimination of HCV.

**Results.** The viremic prevalence is estimated to have peaked in 1998 (601,000 individuals), and to decline 40.2% by 2030 (359,000 cases). However, the number of cases of compensated (n = 74,500) and decompensated (n = 9,480) cirrhosis, HCC (n = 4,170), and liver-related deaths (n = 3,670) will peak between 2028-2032.

Compared to the base case, under restricted treatment HCV related mortality will decrease 7% by 2030. Under unrestricted treatment, HCV related mortality will decrease 22% by 2030. Elimination was achieved through aggressive treatment and diagnosis wherein mortality was decreased by 77%.

**Conclusion.** Prevalence of HCV infection in Turkey has been declining for the last 15 years; however, the prevalence of HCV-related liver disease, morbidity and mortality is increasing. This analysis may facilitate the development of strategies for HCV care and management in Turkey.

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