

sustaining progress

Fighting Hepatitis B with Vaccinations in Rural China

As many as 400 million people worldwide are chronically infected with hepatitis B virus (HBV) – and most don't even know it. That's because they can be symptom-free even as the virus quickly replicates. They may only feel a little fatigued at first, but if not successfully treated, HBV can eventually cause liver cancer and even death. HBV infection is the most common cause of chronic hepatitis and liver cirrhosis and is the ninth leading cause of death worldwide.

China has perhaps been hardest hit, with about 250,000 to 300,000 people dying each year from complications of hepatitis B. Because there is no direct and simple cure, the best way to deal with the disease is through vaccination, preferably of newborns. Many mothers in Asian countries are unaware that they are carrying the virus, and so their babies' chances of getting the disease, unless vaccinated within the first day of life, are great. Most East Asian and Southeast Asian countries introduced mass HBV vaccination programs during the late 1980s and mid-1990s, resulting in a drastic decline in the HBV carrier rate and the number of patients with complications caused by the virus.

However, this vaccination program has not yet spread throughout all of China, particularly in its rural regions. That is where the Bristol-Myers Squibb Foundation has sought to provide help and a model for the future. Beginning in six rural counties in northwestern and central China – encompassing some 2.4 million people – the Foundation has provided a two-year grant to facilitate education of local health care workers, physicians and villagers. The recipient was a Chinese NGO called the China Foundation for Hepatitis Prevention and Control.

Says Professor Wang Zhao, vice council chairman of the Chinese founda-



tion, “To do our work, two components are necessary: the hardware and the software. The hardware – the vaccinations – is provided by the state. The software – the tools to spread information about vaccinations to change people’s ways of thinking and increase their knowledge about the disease – comes from the Bristol-Myers Squibb Foundation. Without this software, the hardware is useless.

“Before receiving our education, these villagers didn’t grasp the importance of vaccinations,” she continues. “To them, if they weren’t sick, there was no need to spend any money on medicines. But when health officials see our program and our brochures, they wish to use them in their own areas. As a result, villagers are paying more attention to their health. The dangers of hepatitis and the importance of vaccinations have seeped into their everyday conversations. Many people have taken it upon themselves to go to hospitals to see if they have the disease and if not, to get a vaccination.”

Some of China’s leading health experts trained representatives of health departments, disease control centers, local medical schools and hospitals. These health workers, using project-funded brochures and other information, then go to villages to educate local doctors – many of whom practice medicine only part-time while spending the balance of their time in the fields farming. Local doctors in turn educate their patients about the importance of hepatitis B vaccinations. Patients are encouraged to have their newborns vaccinated and to receive proper follow-up care.

Progress is being made. More than a half million families have been educated about vaccinations, more than 3,000 front-line health care professionals have been trained and more than 12,000 newborns in the region vaccinated. Before the program, the vaccination rate among newborns in the six counties was 30-40 percent – well below the “full” vaccination rate achieved in urban areas. Now the rate among newborns is 90 percent or more.