Worldwide, more than 257 million people are chronically infected with hepatitis B virus (HBV) and, even though a prophylactic vaccine and effective antiviral therapies have been developed, there is no cure.

HBV kills more people than malaria. Chronic HBV (CHB) infection results in 887,000 deaths per year from cirrhosis and liver cancer. CHB cannot be cured today due in part to the continued presence of a viral reservoir that is not targeted by current therapies. CHB persists despite the best treatment, and risks of liver cancer remain. Current treatments must generally be taken for life to remain effective and fewer than 10 per cent of people who need them have access to them. Experts estimate that liver cancer deaths will substantially increase in coming decades while deaths from most other cancers and major communicable diseases are decreasing.

This high burden of disease, in spite of the availability of effective interventions to prevent infection and treat adverse outcomes in those affected, warrants a coordinated international effort to cure CHB. The International Coalition to Eliminate HBV (ICE-HBV) was created in 2016 to answer this need.

Building on the current momentum, there could be a cure for HBV within a decade, which would save millions of lives and could reduce the economic burden of life-long therapy for CHB.

Fabien Zoulim, ICE-HBV Chair
The push for a cure for CHB infection is particularly timely and builds upon a solid foundation.

Recent scientific discoveries herald an exciting new era in HBV research. These include:

- Identification of the NTCP receptor, the point of entry the virus uses to infect cells,
- Improved cell culture and animal models,
- Characterization of the function of HBx, the viral protein that favours replication of the virus,
- Increased knowledge of HBV minichromosome biology.

Significant momentum in the global response to viral hepatitis and effective curative treatments for hepatitis C create fertile ground for a global push for an HBV cure.

A combination of strategies that target the virus and enhance the immune response will most likely be required to cure the infection.

**ICE-HBV**

ICE-HBV aims to fast track the discovery of a safe, effective, affordable and scalable cure to benefit all people living with CHB, including children and people living with HCV, HDV and HIV co-infection. ICE-HBV intends to contribute to the elimination of CHB as a global public health challenge.

ICE-HBV conducted an inclusive nomination process and formed international multidisciplinary scientific working groups consisting of leaders in hepatitis B virology, immunology, technology and clinical research. The groups have collaborated to identify current strengths in the HBV field that can be built upon, as well as knowledge gaps that must be addressed, to achieve a cure.

**HBV Cure Strategies**

- **Antivirals**
- **Therapeutic Vaccines**
- **Combination Therapies**
- **Immune-based Therapies**

**ICE-HBV participates in the DZIF-ANRS international research project on the standardization of quantitative cccDNA measurements.** The objective of this project is to develop reliable laboratory protocols for cccDNA quantification by comparing head-to-head different methodologies and by exploring new strategies to improve the specificity of cccDNA qPCRs.

Our aim is to inspire and support the discovery of a safe, scalable and effective cure for the benefit of all people living with CHB. To achieve this, we have created an international research-driven forum, which is coordinating, promoting and fostering collaborative partnerships among researchers and stakeholders, to accelerate the discovery of a CHB cure.

Peter Revill, Inaugural ICE-HBV Chair, Peter Doherty Institute for Infection and Immunity

The time is right for a coordinated and international research campaign such as ICE-HBV to find a cure. The almost one million deaths from hepatitis B worldwide each year is unacceptable, but recent advances in science make this a winnable battle. I am optimistic that a cure is possible and within reach if we all work together to make hepatitis B history!

Joan Block, Co-founder and Senior Advisor, Hepatitis B Foundation
Key Goals

GOAL 1
Generate knowledge, foster collaborations and perform research to accelerate scientific innovation in collaboration with key stakeholders.

1.1 Perform basic science research and coordinate the development of essential research tools, such as standardized assays for cccDNA, novel biomarkers to predict cure, new cell-culture models, in-vivo models and HBV DNA rapid diagnostics.

1.2 Promote and support the establishment of HBV reagent, material and standardized protocol repositories available to all.

1.3 Monitor scientific progress using the ICE-HBV scientific strategy as the baseline.

GOAL 2
Disseminate knowledge and engage key stakeholders to ensure the timely translation of discoveries into positive health outcomes and quality of life.

2.1 Support cure preparedness activities undertaken by key stakeholders working together in the Stakeholders Consulting Group.

2.2 Collaborate with key stakeholders and media to increase global awareness of HBV public health impact.

2.3 Disseminate HBV and HDV cure research among international stakeholders and national health systems.

GOAL 3
Support a sustainable international multidisciplinary scientific coalition to find a cure for HBV and HDV.

3.1 Ensure that the governance framework is supportive of ICE-HBV vision and values.

3.2 Develop multi-year resources for ICE-HBV sustainability.

3.3 Continue building the coalition.

WHAT YOU CAN DO

1. Support ICE-HBV activities by: funding our working groups; donating towards one of our young investigator projects; and/or sponsoring our meetings.

2. Raise awareness and advocate for an HBV cure, asking your government to fund life-saving research on CHB.

CONTACT US

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HBV Prevention, Care, Treatment and Cure

ICE-HBV supports the global health sector strategy on viral hepatitis (WHO, 2016). By no means should the strengthening of HBV cure research direct resources away from scaling up effective HBV prevention, care and treatment programmes. However, the HBV scientific community believes that governments, foundations and other research sponsors should work together to make a substantial investment in HBV cure research now. HBV research has been largely underfunded compared with other diseases; enhanced investments could make a big difference and create important resource savings by 2030. Furthermore, scaling up deployment of current treatments is not enough to prevent adverse outcomes in all recipients of care; a substantial risk of liver cancer remains. Coupled with the implementation of the 2016 global health sector strategy on viral hepatitis, an HBV cure could hopefully eradicate HBV, thus saving millions of lives.

Given scientific advances, HBV cure research is getting closer. Investments made today could make all the difference and prevent adverse outcomes in all people infected with HBV, allowing them to live treatment-free, fully productive live, and reducing the stigma associated with this chronic infection.

Christian Bréchot,
ICE-HBV Honorary President

REFERENCES