

Efforts to Eliminate Hepatitis Deliver Gains but More Action Needed to Meet 2030 Targets

Hepatitis B and C claimed 1.34 million lives in 2024, and transmission continues, with more than 4,900 new infections every day.

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Global efforts to combat viral hepatitis are delivering measurable progress in reducing infections and deaths, but the disease remains a major global health challenge, according to a new World Health Organization (WHO) [report](#) released today at the World Hepatitis Summit.

Viral hepatitis B and C—the two infections responsible for 95% of hepatitis-related deaths worldwide—claimed 1.34 million lives in 2024, the latest data show. At the same time, transmission continues, with more than 4,900 new infections every day, or 1.8 million each year.

The 2026 Global hepatitis report documents significant gains made since 2015. The annual number of new hepatitis B infections has dropped by 32% and hepatitis C-related deaths have fallen by 12% globally. Hepatitis B prevalence among children under five has also decreased to 0.6%, with 85 countries achieving or surpassing the 2030 target of 0.1%.

These achievements reflect the impact of sustained, coordinated global and national action following the adoption of WHO viral hepatitis elimination targets by member states at the World Health Assembly in 2016. However, the report warns that current rates of progress are insufficient to meet all 2030 elimination targets, underscoring the urgent need to accelerate prevention, testing, and treatment efforts worldwide.

“Around the world, countries are showing that eliminating hepatitis is not a pipedream, it’s possible with sustained political commitment, backed by reliable domestic financing,” said Dr. Tedros Adhanom Ghebreyesus, WHO Director-General. “At the same time, this report shows that progress is too slow and uneven. Many people remain undiagnosed and untreated due to stigma, weak health systems and inequitable access to care. While we have the tools to eliminate hepatitis as a public health threat, urgent scale-up of prevention, diagnosis and treatment is needed if the world is to meet the 2030 targets.”

Global burden and gaps in response

Updated WHO estimates indicate that 287 million people were living with chronic hepatitis B or C infection in 2024.

That year, 0.9 million people were newly infected with hepatitis B. The WHO African Region accounted for 68% of new hepatitis B infections, yet only 17% of newborns in the region received the hepatitis B birth-dose vaccination.

A further 0.9 million hepatitis C infections were recorded in 2024. People who inject drugs accounted for 44% of new infections, highlighting the urgent need for stronger harm reduction services and safe injection practices.

Of the 240 million people with chronic hepatitis B in 2024, fewer than 5% were receiving treatment. Only 20% of people with hepatitis C have been treated since 2015, when a new 12-week treatment with a cure rate of about 95% became available.

As a result of limited access to prevention and care, in 2024 an estimated 1.1 million people died from hepatitis B and 240 000 from hepatitis C. Liver cirrhosis and hepatocellular carcinoma [liver cancer] were the main causes of hepatitis-related deaths. A large share of hepatitis B-related deaths occurred in the African and Western Pacific Regions.

Ten countries—Bangladesh, China, Ethiopia, Ghana, India, Indonesia, Nigeria, the Philippines, South Africa and Vietnam—accounted for 69% of hepatitis B related deaths worldwide in 2024. Hepatitis C-related deaths are more geographically dispersed. In 2024, ten countries accounted for 58% of the global total: China, India, Indonesia, Japan, Nigeria, Pakistan, the Russian Federation, South Africa, the United States of America and Vietnam.

Proven solutions

Despite these challenges, progress in countries such as Egypt, Georgia, Rwanda, and the United Kingdom demonstrates that eliminating hepatitis as a public health problem is achievable with sustained commitment and investment.

Highly effective tools are already available:

- hepatitis B vaccine protects more than 95% of vaccinated people against both acute and chronic infections;
- long-term antiviral treatment for hepatitis B can help effectively manage chronic infection and prevent severe liver disease; and
- hepatitis C short-course curative therapy lasting 8-12 weeks can cure more than 95% of infections.

“The data shows that progress is possible but also reveals where we are falling short. Every

missed diagnosis and untreated infection due to chronic viral hepatitis represents a preventable death,” said Dr. Tereza Kasaeva, Director, WHO Department for HIV, TB, Hepatitis and Sexually Transmitted Infections. “Countries must move faster to integrate hepatitis services for people living with hepatitis B and C into primary care, and to reach the communities most affected.”

The report identifies priority actions to accelerate hepatitis elimination as a public health threat. These include scaling up treatment for chronic hepatitis B infection, particularly in the WHO African and Western Pacific regions, and expanding access to hepatitis C treatment in the WHO Eastern Mediterranean Region.

It also calls for stronger political commitment and financing, improved coverage of hepatitis B birth-dose vaccination and expanded antiviral prophylaxis to prevent mother-to-child transmission of HBV infection, particularly in the WHO African Region. In addition, the report emphasizes the need to improve injection safety in both health-care settings and community practices, including through strengthened harm reduction services for people who inject drugs.

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