



Canadian Liver Foundation  
Fondation canadienne du foie

*Bringing liver research to life*  
*Donner vie à la recherche sur le foie*

## INVITATION

Dear Doctor,

We are pleased to invite you to join the Canadian Liver Foundation for an educational event, "Current Perspective on Hepatitis B", presented by Gastroenterologists, Dr. Eric Yoshida and Dr. Peter Kwan. This event is hosted, free of charge, by the Canadian Liver Foundation.

Date: Wednesday, July 10, 2019

Time: 6:30 – Registration  
7:00 – Dinner  
8:00 - Presentation

Venue: Sun Sui Wah  
3888 Main St, Vancouver

RSVP: Monica Chui  
[mchui@liver.ca](mailto:mchui@liver.ca)  
604-707-6433

For any questions or enquiries, please do not hesitate to contact me or Ms. Monica Chui.

We look forward to seeing you on July 10!

Yours sincerely,

A handwritten signature in black ink, appearing to read "Francis Ho". The signature is fluid and cursive, with a large initial "F" and "H".

Dr. Francis Ho  
Clinical Professor Emeritus, UBC  
President  
Canadian Liver Foundation  
BC/Yukon Region



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## BACKGROUND

Hepatitis B burden in the world is estimated to be anywhere from 240 – 400 million people and three quarters of the carriers resides in Asia/Southeast Asia. If left untreated 20– 30 % will succumb to advanced liver disease (cirrhosis) and hepatocellular carcinoma (HCC). Each year 500,000 – 600,000 people worldwide will die as a direct consequence of hepatitis B infection. Although hepatitis B vaccination was available in the early 1980's and most countries in the world has policy for universal vaccination of neonates; in practice, it is not always the case.

British Columbia and specifically in the Greater Vancouver area, there is a large population of Asians, most of the immigrants originated from countries where hepatitis B is endemic. For the estimated 2.6 million people in Greater Vancouver, about 1 million are of Asian descent. The three countries that contributed most of the Asian populations are China, the Philippines and India. Of the three, China and the Philippines have hepatitis B carrier rate of about 8% even in the current post vaccination era.

Not unexpectedly, in clinics and hospitals, we are seeing a fair number of hepatitis B patients. Also tragically, hepatitis B is quite often not diagnosed until the patients present with liver cancer - the main cause of death for untreated hepatitis B carriers. For example, in BC Cancer Agency, roughly half of all the cases of liver cancer are hepatitis B related. This is not to say that other liver diseases do not cause liver cancer, but hepatitis B is unique in that cirrhosis is not a prerequisite for development of cancer. The World Health Organization has classified hepatitis B as an oncogenic virus.

It is therefore imperative that all hepatitis B carriers should be identified and those who need it receive therapy. The current knowledge of hepatitis B treatment lags behind those in hepatitis C where it can be effectively cured by an oral drug given for 8 - 12 weeks. However, we do have effective medications to control the replication of hepatitis B virus, and consequently limits the damage to the liver and the chance of liver cancer. More importantly, known hepatitis B carriers can be surveyed to catch liver cancer early - where it is a lot more amenable to treatment.

The data from Western countries with significant Asian immigrants showed that about 40% of all hepatitis B carriers actually are unaware of the presence of the virus. This figure was published by the Center for Disease Control in Atlanta, as well as from Australia and various regions of USA such as California and New York. It stands to reason that Vancouver is no different. Given the figures cited above, it is actually somewhat shocking to learn that in British Columbia, there are less than 1,500 patients receiving treatment for hepatitis B province wide, something that does not add up.