

November 2017

# Good Liver



## Hepatitis Victoria's 25th Anniversary event

On Thursday October 19, Hepatitis Victoria celebrated 25 years supporting and advocating on behalf of Victorians living with viral hepatitis with an event near its offices in Brunswick.

## Fighting for better liver health for all:

*Good Liver* spoke to Hepatitis Victoria CEO Melanie Eagle about Hepatitis Victoria's new Five-Year Strategic Plan for 2017-2022 and her thoughts on the path that lies ahead.

## The sixth international INHSU symposium

Hepatitis Victoria's Health Promotion Project Officer Sione Crawford attended the INHSU conference dedicated to hepatitis C treatment in people who use and inject drugs.

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### Reader response

Your comments or experiences in regard to any articles in *Good Liver* are welcome.  
Email: [admin@hepvic.org.au](mailto:admin@hepvic.org.au)

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# Communique

## From the desk of the Chief Executive Officer



Our November edition of Good Liver brings exciting news for Hepatitis Victoria, as we not only mark new strategic directions, but also celebrate 25 years of information, support and advocacy for people living with viral hepatitis.

A fantastic party bringing together many of those instrumental in building Hepatitis Victoria over the years was held on October 19 with a great music line up - Soul Muse, Dili Allstars and The Travellers – Take a look at the pictures; a great night was had by all!

We have certainly come a long way and achieved much during these years. Yet there is still a long way to go as we make people aware of viral hepatitis, and also as we expand our mission to broader liver health in recognition of the many conditions that impact on this vital organ.

There is much to do as we continue to acknowledge and address the serious challenge of viral hepatitis, which impacts around 500,000 Australians, and is a major driver of increasing deaths from liver cancer.

A vital part of our work will continue to be fighting the stigma and discrimination that pose an often-deadly barrier to people seeking treatment that can significantly improve their health, and, indeed, save their lives.

As we begin to address a wider range of liver challenges in our future work, we will not only pursue prevention, testing and treatment, but

also work to remove the range of barriers that stand in their way.

This continuing evolution can be seen as the story of our growth and development over the past 25 years.

Beginning in 1992 as a support group for hepatitis C, Hepatitis Victoria grew to offer a full range of services – advocacy, awareness-raising, education, workforce training, and support. These services were then extended to benefit people living with hepatitis B.

As our work and partnerships have grown in the past, we also look to a future of broadening the stakeholders with whom we collaborate – particularly the primary health care services that are so vital in achieving not only the elimination of viral hepatitis, but also

realistically foresee the elimination of both hepatitis B and hepatitis C in Victoria.

Indeed, commitments to elimination at a state, national, regional and even global level are cause for great optimism. However, the investment needed to deliver on these commitments is not yet at a level that will enable them to be realised, and neither has the health system and those working in it sufficiently adjusted or developed the capacity to test and treat to the extent needed to achieve elimination.

Going forward we will continue to need all players – policy-makers, decision-makers, service providers, researchers and, in particular, the communities affected – collaborating to drive the necessary changes.



Melanie Eagle with The Travellers and HepHero Paul Stewart

in helping people with liver disease resulting from conditions other than hepatitis.

Please take the time to explore our new strategic plan, which you will find included with the print version of this edition. For online readers, it can also be found on our website, along with a report card of our achievements under our previous Strategic Plan for 2013–17.

We are proud that our work has contributed to strengthening the response to viral hepatitis to the point where we can now

**Melanie Eagle**  
CEO



# De-Livering the news

## Nobel Peace Prize for group founded by HepHero Tilman Ruff

**"Like hepatitis B, nuclear war can be prevented and nuclear weapons eradicated," - Tilman Ruff**

Hepatitis Victoria was thrilled with the news that HEPHero, Associate Professor Tilman Ruff, (profiled on page 25) the founding chair of the International Campaign to Abolish Nuclear Weapons (ICAN) is the worthy winner of the 2017 Nobel Peace Prize.

A/Prof Ruff is a HepHero for the groundbreaking work he has done in Indonesia and the Asia-Pacific promoting hepatitis B immunisation for infants and everyone else who needs it.

The International Campaign to Abolish Nuclear Weapons (ICAN) has been the main civil society partner working with the 122 governments concluding in a historic treaty to ban nuclear weapons at the United Nations in New York in July 2017.



Tilman Ruff at U.N. (inset) Nobel Peace Prize award.

Read more about why A/Prof Tilman Ruff is a HepHero: [www.hepvic.org.au/page/1250/hep-heroes-tilman-ruff](http://www.hepvic.org.au/page/1250/hep-heroes-tilman-ruff)

## PODCASTS: The latest from Hepatitis Victoria

Health Promotion Project Officer Sione Crawford recently attended the 6th International Symposium on Hepatitis Care in Substance Users, held in New York.

In a short podcast Sione talks about insights he gained from the symposium, including the vastly disparate ways treatment is provided in different parts of the world, and the United States, and how stigma and ignorance is preventing treatment and killing thousands of people every year. Read Sione's report on page 6.



Sione Crawford - His talk is now on Podcast.

CEO Melanie Eagle also features in a podcast talking about the new 5-Year Strategic Plan.

Hepatitis Victoria podcasts have been introduced by our new Communications Manager Mark Pearce, who has been producing and editing lifestyle, research and science podcasts for almost ten years.

"My idea is to give everyone wanting to know more about liver disease a new way of engaging with the topic. Short podcasts add rich material and content to our website and are great for sharing our message widely on social media and platforms like iTunes," Mark says.



Find the Hepatitis Victoria podcast collection at: [www.hepvic.org.au/podcasts](http://www.hepvic.org.au/podcasts)


## Diverse communities and the hepatitis challenge – towards elimination

A large audience attended *Diverse communities and the hepatitis challenge – towards elimination* held in partnership with the Ethnic Communities' Council of Victoria at Parliament House, Melbourne on Monday 24 July.

Clinical, advocate and community perspectives were shared on tackling the disproportionate impact of viral hepatitis on culturally diverse communities. Presentations were made by the Victorian Health Minister The Hon. Jill Hennessy, MP Parliamentary Secretary for Medical Science The Hon. Frank McGuire MP and the Victorian Multicultural Commission Chairperson Ms Helen Kapalos.

There were also compelling and very impressive human perspectives from a discussion of key affected communities with the following excellent speakers:

- **Peter Waples-Crowe**, Hep Hero, Aboriginal community advocate and artist
- **Dr Chris Leung**, President, Australian Chinese Medical Association Victoria
- **Dr Kudzai Kanhutu**, Refugee Health Fellow, Royal Melbourne Hospital
- **John Gulzari**, HEP Hero, Afghan community advocate
- **Demos Krouskos**, Director, Centre for Culture, Ethnicity and Health
- **Cam Nguyen**, Secretary, Australian Vietnamese Women's Association
- **Rafaat Gerges**, Secretary, Australasia Coptic Society in Victoria

 Check out a new dedicated section created on the Hepatitis Victoria website - [www.hepvic.org.au/page/1254/diverse-communities](http://www.hepvic.org.au/page/1254/diverse-communities)

## Dr G Yunupingu leaves beautiful music, and lessons for action on hepatitis B



*Dr. G Yunupingu – guitar accompanies a beautiful voice.*


Beyond a legacy of profoundly beautiful music, Dr G Yunupingu has helped to focus on the disproportionate impact of hepatitis B on Australia's Indigenous communities. Hepatitis B contracted as a child contributed to the liver and kidney disease that led to his tragically early death. Associate Professor Ben Cowie and colleagues draw some vital lessons in *The Conversation*: [theconversation.com/dr-g-yunupingus-legacy-its-time-to-get-rid-of-chronic-hepatitis-b-in-indigenous-australia-81672](http://theconversation.com/dr-g-yunupingus-legacy-its-time-to-get-rid-of-chronic-hepatitis-b-in-indigenous-australia-81672)

## Change Maker for good Melanie Eagle

The Economist Intelligence Unit (EIU) has recognised Hepatitis Victoria Chief Executive Officer Melanie Eagle as one of 18 global

'Change Makers' and innovator for her advocacy efforts to support the hepatitis C community and eliminate the virus.

Melanie has been recognised for her efforts in the technology area for raising, "...awareness of hepatitis C amongst healthcare practitioners with online education tools, and amongst patients with a mobile app to assess liver health."

 Read more about her award: [www.hepvic.org.au/news/2160/change-maker-for-good-the-economist-recognises-hepatitis-victoria](http://www.hepvic.org.au/news/2160/change-maker-for-good-the-economist-recognises-hepatitis-victoria)

## Keynote talks dazzle at Cairns conference



*Ben Cowie*


*Greg Dore*

Top Australian experts, Associate Professor Ben Cowie of the Doherty Institute and Professor Greg Dore of the Kirby Institute, gave fascinating and insightful presentations at the Cairns Viral Hepatitis Elimination Conference in September.

Prof Dore's presentation 'On the road to HCV elimination?' showed that the next 2-3 years are crucial if the goal of elimination of hepatitis C by 2030 is to be achieved. "Despite a delayed start, Australia is a leading country in relation to direct acting anti-virals," said Prof Dore.

In his talk '*Hep B: Australian Progress and Challenges*' Prof Cowie spoke about the inadequacy of the response to the growing hepatitis B crisis calling it 'unacceptable' and appearing to violate Australia's human rights treaty obligations.

Both Professors have kindly shared their presentations with us.

 They are available on the Hepatitis Victoria website: [www.hepvic.org.au](http://www.hepvic.org.au)



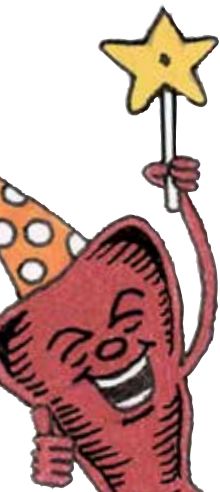
# The sixth international symposium

on Hepatitis Care in Substance Users (INHSU) Symposium 2017



**I**NHSU is the only international conference that brings together community members, researchers and clinicians dedicated specifically to hepatitis C

treatment in people who use and inject drugs. As the community in which most new infections occur, this is a critical gathering of expertise. Every year the conference has grown – from around 100 attendees seven years ago to around 500 this year.



INHSU 2017 was held in Jersey City, USA from September 5 to 8 and Hepatitis Victoria's Health Promotion Project Officer Sione Crawford received a community scholarship to attend.

The community scholarship attendees were given space on the Tuesday before the conference to meet and discuss issues of importance to the community in relation to hepatitis C care.

A community statement was prepared and delivered to the first plenary session the next day reflecting the key concerns of the community members who attended. It is available on the INHSU 2017 website.

“The symposium showcased research with high efficacy and adherence and low reinfection rates for people who inject and undertake treatment,” Sione said.

There were also numerous presentations and reports from community based access, peer support and linkage to care projects and research.

“In my talk, I spoke about a range of approaches that have proven effective at engaging peers and community in treatment support and linkages to care. However, it requires resourcing and commitment at all levels and in all places along the continuum and cascade of care to meaningful community engagement,” Sione said.

**A number of key messages came through during the symposium:**

**1. User health in general needs to be prioritised alongside hepatitis C**

Mark Tyndall, from British Columbia Centre for Disease Control, Canada pointed out that not only are issues such as housing, trauma, poverty more pressing for many users than a hep C cure, we are currently seeing an opioid overdose epidemic in North America that is concurrently raising hepatitis C incidence dramatically.

**2. There is more to hepatitis C treatment than a cure**

Magdalena Harris from the London School of Hygiene & Tropical Medicine spoke about how the non-clinical benefits to hepatitis C treatment that existed for many in the



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interferon era – increased engagement with health systems, personal change – might continue in the direct acting anti-viral (DAA) era, when such supports are no longer available for a treatment perceived to be easier. Carla Treloar from the University of NSW spoke about Patient Reported Outcomes and Experience Measures – both of which are designed to record non-clinical impacts of treatment.

**3. Direct Acting Anti-viral's (DAAs) are highly effective for people who currently inject and use drugs**

Jason Grebely, from the Kirby Institute, and many others presented numerous real-world studies that show unequivocally that people who are using and people in drug treatment respond to treatment as well as any other populations.

“...Real-world studies show unequivocally that people who are using and people in drug treatment respond... as well as any other populations.”

**4. Testing, diagnosis and linkage to care are critical to DAA access - simplified treatment models must be pursued**

Victorian nurses Jacqui Richmond and Lucy McDonald showed that nurse-led models of care, wrap around services and meeting people who want treatment where they are in the community are effective strategies that need to be expanded.

**5. Globally, DAA restrictions must be addressed if elimination is to be a realistic goal**

Very few nations have Australia's unrestricted access models. In parts of the USA urine screens showing six-months abstinence from all drug use or six months in drug treatment must be shown, for instance, before being able to access treatment. This must change if the World Health Organisation goal of elimination by 2030 is to be met. DAA medication prices are lowering globally but they are still used as a reason not to treat people who would otherwise respond to a cure.



Listen to the podcast interview with Sione talking about his reflections on the symposium [www.hepvic.org.au/podcasts](http://www.hepvic.org.au/podcasts)

# Internal Medicine Journal Article: Reprint

## Liver cancer deaths continue to rise in Australia: is elimination by 2030 possible?

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### Letters to the Editor

Deaths from liver cancer continue to rise in Australia: is elimination by 2030 possible?

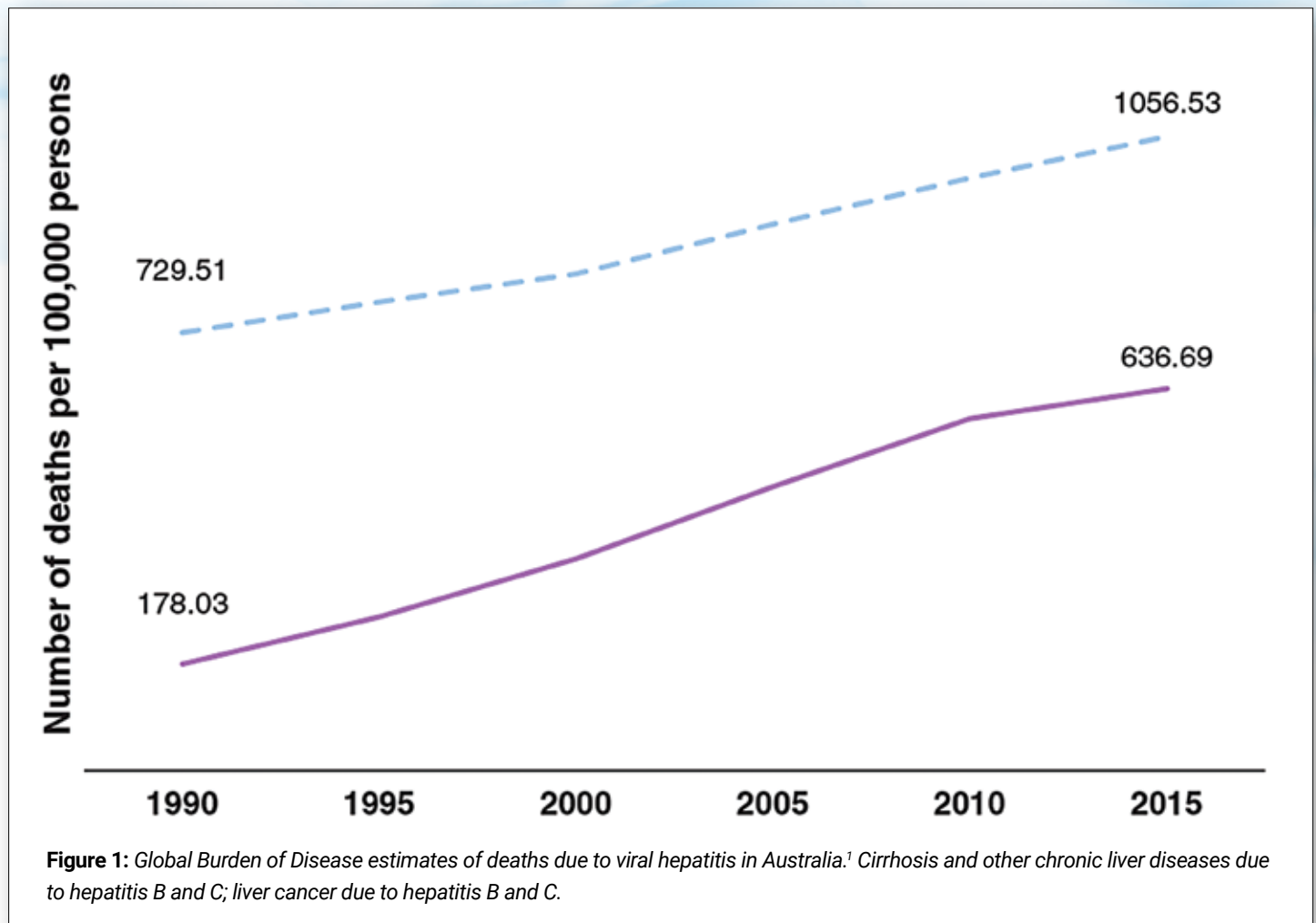
Two recently released data sets highlight the increasing health burden associated with viral hepatitis in Australia, and the importance of scaling up prevention and treatment to avert adverse outcomes in those affected. Estimates from the Global Burden of Disease (GBD) Study 2015 demonstrate a continued increase in deaths attributable to cirrhosis and liver cancer caused by viral hepatitis in Australia (Fig. 1).<sup>1</sup> Of all 167 causes of death in

Australia analysed by the GBD study, liver cancer had the fifth highest annual percentage increase in mortality between 1990 and 2015.<sup>1</sup> While the fact that liver cancer is the fastest increasing cause of cancer death in Australians has previously been highlighted,<sup>2</sup> these GBD findings emphasise the relative importance of liver cancer among all causes of death of Australians. Liver cancer also remains an outlier in the otherwise continued positive progress in cancer prevention and care, and the latest Australian Institute of Health and Welfare cancer report further demonstrates that:

- Liver cancer is projected to climb from the seventh most common cause of cancer death in 2012 to the sixth in 2016;

- In an era of increasing cancer survivorship 5-year survival for liver cancer continues to be lower than all cancers – 16% compared with 67%;
- Liver cancer mortality was three times greater in Indigenous compared with non-Indigenous Australians in 2014.<sup>3</sup>

For the 443 000 Australians estimated to be living with viral hepatitis,<sup>4</sup> reduction of liver-related mortality is possible with harm reduction, early diagnosis and appropriate treatment. The welcome revolution in hepatitis C antiviral therapy and subsequent listing of these agents on the Pharmaceutical Benefits Scheme (PBS), together with increased availability of effective hepatitis B antivirals, has the potential to reverse the increasing numbers





of deaths attributable to viral hepatitis.<sup>5</sup> The first 6 months of direct-acting antiviral therapy on the PBS has seen over 25 000 people treated.<sup>5</sup> Sustained virological response in people living with hepatitis C will reduce their risk of liver cancer however those with cirrhosis will continue to have a significant 5-year risk at 5.3% and ongoing 6-monthly surveillance with ultrasound is recommended.<sup>6</sup> Given that liver cancer is more common in people born overseas<sup>7,8</sup> and liver cancer mortality is markedly greater in Indigenous Australians,<sup>3</sup>

proportion of people living with chronic hepatitis B who have been diagnosed, and triple the number of people receiving antiviral treatment for hepatitis B, in line with National Strategy targets.<sup>9,10</sup> In our region, Australia is uniquely placed to eliminate viral hepatitis as a public health concern. It is vital that we turn this possibility into reality for all Australians living with viral hepatitis, and demonstrate to the world that the goal of elimination is achievable in the coming decades.

**Chelsea R. Brown, Nicole L. Allard,  
Jennifer H. MacLachlan, Ben Cowie.**

**The critical challenges now are to sustain the early momentum of the new hepatitis C virus therapy era, urgently increase the proportion of people living with chronic hepatitis B who have been diagnosed, and triple the number of people receiving antiviral treatment for hepatitis B, in line with National Strategy targets.**

the provision of equitable access to care, including assessment of fibrosis, liver cancer surveillance and treatment for viral hepatitis across Australia is essential to impact on the rising mortality observed in the GBD.

The critical challenges now are to sustain the early momentum of the new hepatitis C virus therapy era, urgently increase the

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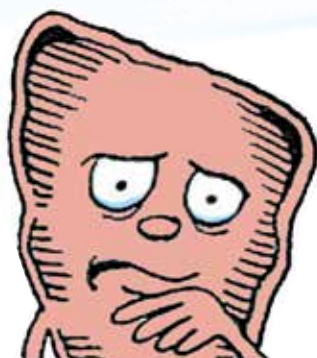
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# 25th Hep Vic Anniversary event

Hepatitis can now be conquered, but ignorance and stigma remain

**25** years on hepatitis can now be conquered but ignorance and stigma remain.

On Thursday October 19, Hepatitis Victoria celebrated 25 years supporting and advocating on behalf of the approximately 100,000 Victorians living with viral hepatitis with an event near its offices in Brunswick.

A fantastic party bringing together many of those instrumental in building Hepatitis Victoria over the years was held in the evening with a great music line up - Soul Muse, Dili Allstars and The Travellers – a great night was had by all!

To kick-off proceedings, Doreen Lovett gave a marvelous and emotional Acknowledgement of Country, relating her deep personal experience.

Here are some pictures of the night, the stars, and the winners!

Frank Carlus and Chris Carter



Sione Crawford, Steven Taylor and Aunty Doreen



Garry Irving with Frank Carlus



Aurora, Lucia, Kudzai, and Uyen

# 25th Hep Vic Anniversary event

Hepatitis can now be conquered, but ignorance and stigma remain



As part of the event the winners of our annual awards, recognising individuals and organisations who have made considerable and outstanding contributions to the lives of those who are living with viral hepatitis were announced.

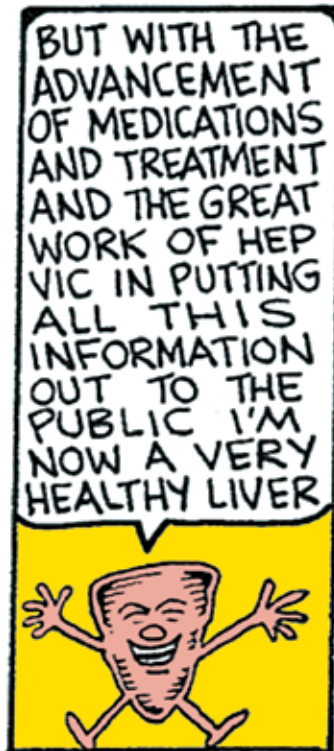
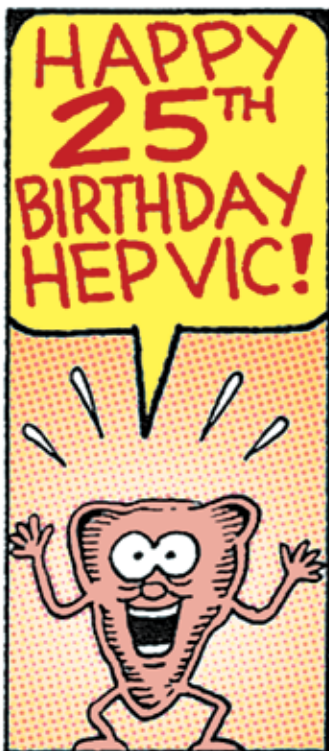
- Mark Farmer Memorial Award: 2017 winner - **Pam Wood**
- Individual Contribution Award: 2017 joint winners - **Dr Jacqui Richmond** and **Dr Peter Higgs**
- Organisational Collaboration Award: 2017 winner - **North Western Melbourne Primary Health Network**

We congratulate the winners along with their fellow nominees. You made the selection panel work overtime!

From tiny beginnings as a volunteer organisation called the Hepatitis C Foundation of Victoria, Hepatitis Victoria has grown into a professional peak body with a state-wide remit and responsibilities to support, advocate and educate about viral hepatitis.



*Khaing, Melanie and Uyen*



# 25th Hep Vic Anniversary event

Hepatitis can now be conquered, but ignorance and stigma remain



Nicole Gunn in serious mode with Steven Taylor

As part of the celebration event, the excellent MC for the night, HepHero and spoken word performance artist Steven Taylor interviewed Julie Shiels and Rhonda McCaw who were both instrumental in the early foundation years of Hepatitis Victoria.

They talked about the ignorance and struggle people with the virus faced in the early years, and the steps they each took; Julie to create a professional organisation and Rhonda to help establish evidence-based research into the disease.



Steven Taylor and Julie Shiels

“It was just dreadful... doctors were ill-informed and, for instance, advised women with hep C not to have children. No one knew anything with any consistency. No one knew how dangerous blood could be. People feared for their jobs. The level of stigma was high.” Julie said.

“The Myer Foundation funding eventually enabled us to leverage the State Government into funding the organisation that is now known as Hepatitis Victoria. Since that time the organisation has come a long way, as has the community and industry response to the disease, she said.”



Melanie and Ian Gracie deep in conversation

# 25th Hep Vic Anniversary event

Hepatitis can now be conquered, but ignorance and stigma remain



Hepatitis Victoria CEO Melanie Eagle read a very warm statement of recognition and congratulations from Victorian Health Minister, the Hon. Jill Hennessey.

“Our goal is to create a Victorian community where there are no new infections of viral hepatitis, and where those who have it can maximise their health and well-being,” Melanie said.

“We have come a long way, and stand proudly on the shoulders of the many individuals who have contributed to building a strong response to hepatitis in this state. Many people have received support, many lives have been saved. Still, there is much more to do if we are to achieve elimination,” she added.

Read, see and listen to more about the night at the website: [www.hepvic.org.au/news](http://www.hepvic.org.au/news)



Barbara and Damian

# Fighting for better liver health for all:

The next five years



**T**his edition of *Good Liver* includes a handy pull-out detailing Hepatitis Victoria's new Five-Year Strategic Plan for 2017-2022.

In addition to describing our vision and values, the pull-out describes the five pillars on which we are building our work for all Victorians. These are; improving liver health, supporting and mobilising those affected, stopping stigma, promoting responsive health care and driving Hepatitis Victoria's organisational performance.

There is also a section on the highlights and milestones from the last 25 years.

*Good Liver* spoke to Hepatitis Victoria CEO Melanie Eagle about the plan and her thoughts on the path that lies ahead. The following are excerpts from a short podcast interview with Melanie available on our website: [hepvic.org.au](http://hepvic.org.au).

## Q Why do we need a new Five-Year plan Melanie?

A The new plan builds on the work we have already done by exploring all the ways we can assist people with viral hepatitis and improve the community response. We have expanded our remit to include broader liver health issues -people who may have health issues as a result of viral hepatitis as well as those with liver disease as a result of other conditions.

## Q Why the broader remit?

A We have broadened our remit because the new treatments for hepatitis C mean there are people being cured but who still have liver damage and we have to think about how to properly respond to help them.

There are also current and growing concerns from the community about the increase in other liver diseases, particularly alcoholic liver disease. There aren't places for these people to go and no support information, and we would like to respond to those needs.

## Q What's your approach to hepatitis B and C in the plan?

A We want to be innovative and flexible, providing new ways for people to get information and be supported and informed online. We must be innovative in the digital space and one of the ways will be to create tools so that people can participate in chronic disease self-management. We also want to continue to equip the workforce so that they can support change and empower people to take action.

Our health and community workforce is well-positioned in their interactions with clients living with, or at risk of hepatitis, they are in a fantastic position to encourage them to be tested and access treatment, and we want them to be part of that change.

Our broad vision is a society without liver disease, one where those who do have it have access to the best treatment... *Melanie Eagle*

Our broad vision is a society without liver disease, one where those who do have it have access to the best treatment and are well managed.

## Q How is Hepatitis Victoria going to innovate?

A It's a big task, happily we are up to the challenge as the team at HepVic is very committed and courageous, and we are pretty keen to get on with the job.

A lot of this is about learning how to communicate with the at-risk populations in ways that are relevant for them. There are many people in the community who are not yet aware of their hepatitis status and what they need to do about it.

## Q What do you see as the biggest challenge in the coming years?

A Liver cancer: This is really important for the community to know but very poorly understood. Liver cancer -largely caused by viral hepatitis- is the fastest growing cancer in Australia. It is critical we have a multi-pronged response, including one that is directed by those who are affected and respond immediately to their needs.

Stigma is still a huge barrier. We want to break through the barriers of stigma and ignorance that are critical to overcome.

## PODCAST



Listen to a HepVic podcast recording of the interview with Melanie available on the: [hepvic.org.au/podcasts](http://hepvic.org.au/podcasts) website.

# The AGM and Annual Report

Scenes from the day



# HEPReady Workforce Training

## For Pharmacists

**Pharmacists are a major health contact point not only for the dispensing of prescriptions but for advice on various health matters. For many of us, they are the first port of call before making an appointment to see the doctor.**

Pharmacists are so vital in the campaign to eliminate viral hepatitis. Many Victorian pharmacies are Needle and Syringe Programs (NSPs) where they provide clean fits to people who use drugs. They are also responsible for the dispensation of opioid drug replacement medications. Because of these reasons, pharmacists are in contact with the people who are vulnerable to viral hepatitis; indeed, it's estimated 50% of people who inject drugs will have hepatitis C.

We are determined to reach at least 150 pharmacists in this training project, which we anticipate will have a direct impact on the local communities in treating (and in many cases, curing) people with hepatitis.

A new HEPReady® workforce training project has begun that focuses on the pharmacist. The project is funded by the North Western Melbourne Primary Health Network (NWMPHN), which means that the training is subsidised and will be provided free of charge to pharmacists working in the NWMPHN catchment area.



The CEO of NWMPHN, Adj/Associate Professor Christopher Carter said pharmacists can play a frontline role in reducing stigma and discrimination as well as meeting the World Health Organisation's goal of eliminating viral hepatitis by 2030.

"North Western Melbourne Primary Health Network is funding this training for pharmacists in order to provide support, knowledge and new strategies in order to better help people living with hepatitis and liver disease," Adj/Assoc Prof Carter said.

"Pharmacists, as health leaders, can play a key role in reducing stigma and discrimination which is vital if we are to eliminate viral hepatitis by 2030."

A Reference Committee has been established to oversee the project, including the course content. Four pharmacists have been enlisted: Madeleine Hills, Alvin Narsey, Nadera Rahmani and Adrian May. Dr Peter Higgs from La Trobe University and Dr Kudzai Kanhutu from the Royal Melbourne Hospital have joined the Committee as experts in the fields





Nicole Gunn and Adrian May

*Pharmacists, as health leaders, can play a key role in reducing stigma and discrimination which is vital if we are to eliminate viral hepatitis by 2030, Adj/Assoc Prof Carter said.*

of people who inject drugs and migrant/refugee health respectively.

The project plan includes producing a series of Z-cards (business card size, six-sided accordion cards) that the pharmacist may hand out to their clients or insert in prescription packages. The three cards focus on different aspects of the hepatitis epidemic: one card will be about hepatitis B, another about hepatitis C, and the third, on safe injecting practices (hepatitis prevention).

We are hoping that the act of the pharmacist handing out the card will initiate a conversation with the client about hepatitis, and encourage the person, if they have not already done so, to be tested and treated.

A trained team of volunteers is visiting pharmacists in the north west of Melbourne region to distribute the Z-cards and invite pharmacists to the professional training which will be conducted primarily online.

Video interviews will be reinforced by a

Participant Guide that contains technical and statistical information about hepatitis B and hepatitis C.

The courses are accredited by the Australian College of Pharmacy, which means that pharmacists will receive 4 CPD points for each course.

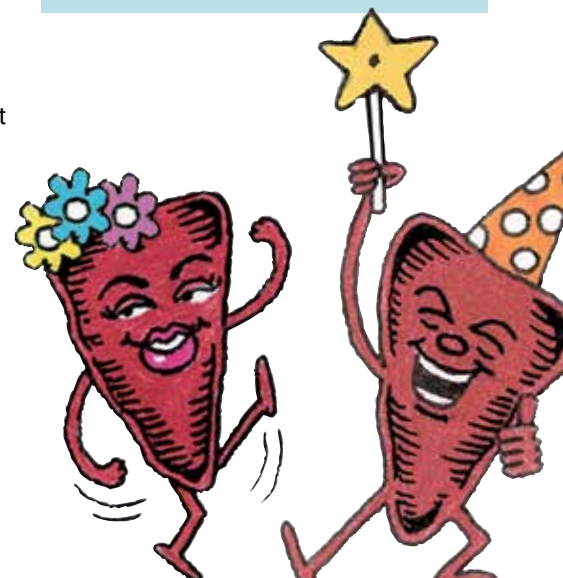
In the context of a real pharmacy with the constant stream of clients and other logistical and client relationship constraints, it's not always easy to raise the issue of viral hepatitis. To this end, the training will include a seminar where the practical realities of conveying important messages about viral hepatitis will be addressed and conducted every 6 weeks for both the hepatitis B and hepatitis C streams.

This is an exciting and ground-breaking project, to be conducted over the next 6 months or so. We are determined to reach at least 150 pharmacists in this training project, which we anticipate will have a direct impact on the local communities in treating (and in many cases, curing) people with hepatitis.

PODCAST



Listen to a podcast interview with Reece Lamshed, the HEPReady<sup>®</sup> Business Training Manager at: [www.hepvic.org.au/podcasts](http://www.hepvic.org.au/podcasts)



# Community education projects

## Team reports on progress

**The last two years have seen Hepatitis Victoria implementing seven exciting hepatitis B community education projects funded by the Commonwealth Government.**

The money was awarded to Hepatitis Victoria after we, and our sister organisations across the country, were invited by Hepatitis Australia to propose projects that would respond to needs in our jurisdiction.

Each of these projects see us working with new communities in different ways and in collaboration with other relevant community and health organisations. Each is designed to provide evidence on how such work might be conducted into the future, and as far as possible for the specific initiative to be self-sustaining.

“These projects have allowed us to take our internal capacity in relation to hepatitis B to a whole new level, with many shared learnings as well as with the staff enriching the organisation’s other work and developing new resources,” said Lara Kanaef, Hepatitis B Community Education Officer.

The seven projects are:

### 1 Vietnamese in Conversation

This project embeds hepatitis B education in the Vietnamese community in Victoria by recruiting, educating, resourcing and supporting Vietnamese peer educators.

Vietnamese peer educators are selected by their engagement and commitment with the Vietnamese community either in their work or life. Collaboration with community-based organisations (eg. the Australian Vietnamese Women’s Association, AVWA) and city councils are established to embed the program and ensure sustainability.



*Vietnamese in Conversation project team in 2017  
Lunar New Year/TET Festival*

Our first Vietnamese peer educator was successfully recruited through the Liver Health and Viral Hepatitis Awareness information booth at the 2017 Lunar New Year/TET festival in February.

### 2. Assertive outreach fights stigma

On World Hepatitis Day clients and staff had a great day with homemade salads and burgers for all.

“Clients at HealthWorks really appreciate all the work we do in squashing stigma and discrimination around blood borne viruses. They love being able to participate in projects that give them access to better health,” says Lara Kanaef of the Hepatitis B Community Education team.



“When I started as outreach officer for people who inject drugs (PWID) assisting them in gaining access to screening and uptake of hepatitis B vaccination, I could see this project would be successful in fighting the stigma and discrimination around blood borne viruses particularly hepatitis B,” she says.

“After working in needle and syringe programs for the last year I was very much aware of not only the myths around hepatitis B transmission but how PWID are often hard on themselves as a result of all the stigma and discrimination they feel from the broader community. While this project has a focus on vaccination uptake and screening, it does it through the important mechanism of building strong trusting relationships with service users and so creating a platform for people to talk openly about their hepatitis B status without the pressure of a doctor or health care worker.

# Community education projects

## Team reports on progress

"We have conducted focus groups and education sessions at 2 different primary drug and alcohol services as part of the resource development and the participants were so passionate about gaining more information around virus transmission and both the acute and chronic stages of hepatitis B," Lara says.

These sessions led to the co-design of a resource that was meaningful, effective and relevant to their community.

The newly-developed resource was formally launched at the hepatitis B themed health promotion month at HealthWorks in Footscray during June 2017. Weekly visits to the site were conducted during June and July. The health promotion activities were successful in creating a safe and open communication platform for PWID to be able to talk freely about their understanding of hepatitis B; and staff were able to work with the community in debunking myths around hepatitis B and addressing stigma and discrimination that unfortunately goes hand in hand with lack of knowledge around the virus.

"At Hepatitis Victoria, we believe everyone has a right to access equal and fair health care but this cannot be done unless we work on building strong, open, trusting relationships mixed with a little sense of humour," says Lara.

### 3. Little HepB Heroes give families a voice



*Little HepB Heroes first planning meeting and Sam the LHBH character, and Lien with Adli the illustrator*

Little HepB Heroes is a project that is listening to families affected by hepatitis B and giving them a voice in the creation of stories that can help other families living with the condition.

Children from schools and playgroups are supported by their families as they work with an artist to create the story of a Little HepB Hero that will be presented as a book and a digital animation. The experiences of children living with families affected by hepatitis B will inform an

engaging story that offers information in a way that other children can understand it, and offer emotional support for families going through the same experiences. Presented as a story, Little HepB Heroes will demystify hepatitis B so children understand what it is, how it can affect health, and why they don't need to fear it.

Children who read the story will be encouraged to see themselves as Little HepB Heroes, sharing what they have learnt to fill the space of misunderstanding and stigma with stories of understanding, acceptance, and simple information about liver health. It is a vital project because a growing number of young people diagnosed with hepatitis B will be raising children. Little HepB Heroes is not only creating the story now, but also the storytellers vital to addressing the needs of people and families living with hepatitis B.

In an exciting development, a video animation featuring Little HepB Heroes is also in production and will be available in the new year. Look for updates at [www.hepvic.org.au/news](http://www.hepvic.org.au/news)

### 4. Raising profile among recent arrivals from Afghanistan



This project works with health and community leaders and focuses on Afghani new arrivals as one of the high-risk groups for hepatitis B.

In order to increase their awareness of hepatitis B and its impact, we are working with organisations across Victoria, particularly in the south-east region in order to establish collaborative relations by raising the awareness of the community about viral hepatitis, and work towards sustainable improved responses to hepatitis.

The Afghan community is one of the high-risk groups for viral hepatitis B. There are more than 10,000 Afghani people living in Victoria and most of them are live in South East Melbourne, particularly the City of Dandenong and City of Casey. After working with this community, we will then be in a position to apply the learnings to work with other newly arrived communities in Victoria,

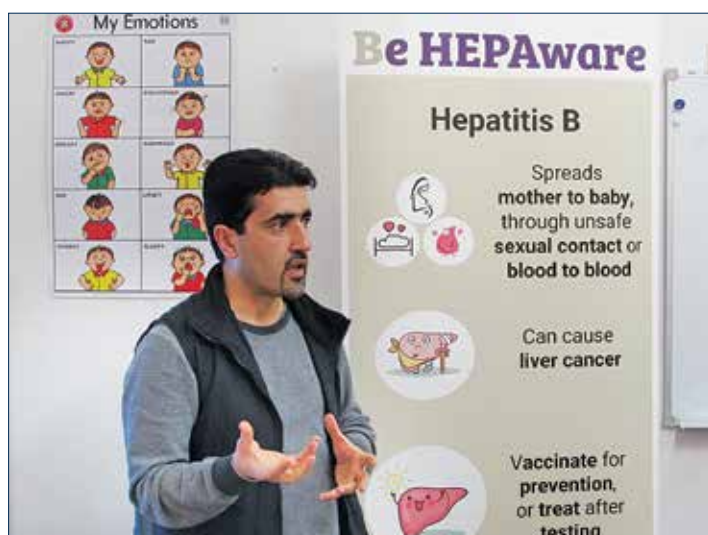
# Community education projects

## Team reports on progress

engaging in a similar way with their leaders and local organisations in order to raise awareness of viral hepatitis.

Given the low literacy rate, particularly the low level of community knowledge regarding hepatitis B and English language barriers, information and resources will be provided by the project to the community in their own languages so they clearly understand the key messages. The project will educate the community members about viral hepatitis and other key issues around testing, transmission, treatment, prevention and vaccination. People with a refugee background and asylum seekers are eligible to get FREE hepatitis B vaccination.

### 5. HepAware in Melbourne's South East



HepAware in Melbourne's South East is a hepatitis B community education project, which uses a regional collaborative approach to raise awareness. The project has established a working group of key stakeholders in order to coordinate a collaborative approach to raising awareness of viral hepatitis B, and support the World Hepatitis Day events in South East Melbourne.

The project has been working with key involved organisations in the area including Monash Health, South Eastern Melbourne Primary Health Network (SEMPHN), enliven refugee health, Women's Health in the South East (WHISE) and Link Health and Community as well as local councils in order to establish collaborative relationships, raise awareness of the community about viral hepatitis, and work towards sustainable improved responses to viral hepatitis in the region. The project will identify culturally appropriate ways to engage with high-risk communities including refugees and migrants. Resources will be developed in a number of key languages spoken by main high-risk groups.

### 6 Hepatitis B education for Aboriginal people in custody

Aboriginal and Torres Strait Islander peoples and unvaccinated adults in custodial settings are identified as priority populations in the Victorian Hepatitis B Strategy 2016-2020.

The Hepatitis B Education for Aboriginal People in Custody project is focused on these two priority populations.

In consultation with Aboriginal people, a culturally-appropriate training module and associated resources are being developed. These will increase the understanding of hepatitis B generally and specifically increase awareness of prevention, diagnosis and management of hepatitis B for people in custody in Victoria.

Training will be delivered at selected sites such as the Dame Phyllis Frost Centre and Loddon prison. Inmates completing the educational program will then be positioned to use their resulting skills in the roles of Respect the Liver Ambassadors and/or Peer Educators specifically for Aboriginal people in custody.

These ambassadors/educators will be supported by workshops from the Hepatitis Victoria project team to present and communicate with their peers.

### 7. Collaborating in Melbourne's West

Collaborating in Melbourne's West seeks to develop an integrated system response to hepatitis B involving primary health care providers, community health services and the hospital sector. The overall aim is the delivery of a streamlined service to those affected by hepatitis B.

As the suburbs of western Melbourne sprawl out further they remain one of the highest in prevalence for hepatitis B, therefore it is essential that all tiers of the healthcare system work together to cater for this sizeable, culturally and linguistically diverse population.

This project is bringing together representatives from community health services, Western Health, the primary healthcare network and Hepatitis Victoria to establish a working group. Through these networking opportunities, relationships have been established and strengthened, and an informative resource relevant to the services in Melbourne's west has been produced. With newly developed community clinics being established in the region, alongside workforce training on hepatitis B for GP's, this project aims to tackle the various barriers faced by residents living with hepatitis B in western Melbourne and will promote localised, culturally appropriate services with limited waiting lists.

*The seven projects are supported by community grants administered by Hepatitis Australia and funded from the Commonwealth Department of Health*

# National health crisis:

## liver cancer on the rise as other cancer rates fall



**A** recent article in *The Conversation* by Terry Slevin of the Cancer Council Australia has revealed the looming health threat posed by liver cancer in Australia. The following is an abbreviated version of the article.

The Australian Institute of Health and Welfare's (AIHW) Burden of Cancer report suggests that while rates of other cancers are falling or remaining static, liver cancer is the only "top ten" cancer for which rates increased between 2003 and 2011.

While still not a common cancer, making up less than 1.5% of the 125,000 cancer cases diagnosed in 2013, liver cancer rates have increased fivefold since 1982. Action is required due to the poor five-year-survival rate of less than 20%.

.....  
"...the major engine driving increased liver cancer is likely to be the rising prevalence of people infected with hepatitis B and hepatitis C viruses."

### But why are diagnosis rates going up?

Unpublished work in progress, which builds on a series of studies by the Cancer Control Group at QIMR Berghofer Medical Research Institute in Brisbane, suggests liver cancer is caused by five main factors.

Tobacco smoking caused 365 liver cancer cases, or about 21% in 2013 in Australia. Hepatitis C virus contributed to 330 cases (19%) of liver cancer. Hepatitis B virus accounted for 281 cases (16%), alcohol 266 cases (15%) and obesity 451 (25%).

### What's to blame?

Falling smoking rates suggest liver cancer figures should have been higher in the past. Due to the lag time between when people smoked and cancer diagnosis, tobacco is still a leading driver of liver cancer. Current smoking trends leave us optimistic these rates may drop in the future.

Similarly, alcohol consumption is on a modest decline and is unlikely to explain the increase in liver cancer.

Obesity is a different story. Well-documented increases in overweight and obesity will likely be a driver of liver cancer through the pathways of diabetes and non-alcoholic fatty liver disease, a condition where fat accumulates in liver cells.

But the major engine driving increased liver cancer is likely to be the rising prevalence of people infected with hepatitis B and hepatitis C viruses. Chronic hepatitis causes infection and inflammation of the liver, which can lead to scarring called cirrhosis. In some, this leads to cancer.

Around 450,000 Australians live with either hepatitis B or hepatitis C. The two viruses are passed on in quite different ways.

More than 90% of people with hepatitis B virus were born overseas in countries where the virus is common, such as the Asia Pacific or sub-Saharan Africa.

Meanwhile, injecting drug users dominate the 227,000 people with chronic hepatitis C virus in Australia, making up 57% of those affected.

### Liver cancer in Indigenous Australians

Aboriginal people are another major group among which hepatitis B virus is endemic and hepatitis C is disproportionately common. High rates of viral infection in these communities (as in any community) are often untreated and tend to persist. This is especially the case when high rates of incarceration, needle sharing and other infection transmission behaviours occur.

While other causes of the disease are also at play, hepatitis rates are likely to be the main culprit to explain disturbing liver cancer rates in Australia's First Nations people. It has become the third-most-common cancer in that group.

### Other cancer deaths expected to rise

Liver cancer is predicted to grow to become the fifth-most-common cause of cancer death in 2020 in Australian men and the sixth-biggest killer in women. This will eclipse melanoma as a cause of death.

### Averting the 'crisis'

Improved efforts to identify and treat people with hepatitis B and hepatitis C viruses are required to combat liver cancer.

Infant vaccination for hepatitis B virus is making great strides, with participation rates exceeding 90% in general and Indigenous populations. While this is good news, the challenge of reaching inbound migrant communities remains.

Needle exchange programs in prisons and outside are vital strategies to reduce needle sharing – the vehicle for much of the transmission of the hepatitis C virus.

Efforts to reduce smoking, obesity and alcohol consumption are under way, but persistence is vital, especially in Indigenous communities. Tools are available to avert the "liver cancer crisis", but we need to use them.

# Hepatitis Victoria welcomes new HEPHeroes



*Dolly Hoang*



**K**nowledge is power - I want to be a HEPHero so I can be part of an amazing team who work together to raise awareness and increase knowledge of viral hepatitis among people from the culturally and linguistically diverse communities in Victoria.

I was born in Vietnam where hepatitis infections have reached an alarming rate. Nevertheless, there is limited knowledge and awareness of the disease in the population. I have a Bachelor of Science in Pharmacology, a Masters in International Health Management, and a Masters in Public Health. In my role as a Community Engagement and Projects Officer at the Centre for Culture, Ethnicity and Health, I work with people from refugee and migrant backgrounds around blood-borne viruses (such as hepatitis) and sexually transmissible infections.

Once people have knowledge, they are empowered to support people affected by the disease as well as fight against stigma, judgement and discrimination.



I began working with Hepatitis Victoria as part of my final year placement for my Masters of Public Health to understand more the burden of hepatitis B and C within the Vietnamese community in Melbourne, including the delivery of education sessions with Vietnamese groups and organisations.

I think it's very important to make the information about viral hepatitis more accessible and culturally appropriate for culturally and linguistically diverse

communities. Once people have knowledge of viral hepatitis, they are empowered to make informed decisions about getting testing and treatment for viral hepatitis.



Vietnamese community festival in Melbourne – SBS



## *Dolly's Message*

Once people have knowledge, they are empowered to support people affected by the disease as well as fight against stigma, judgement and discrimination.

**Join the Hep Heroes team!** Spread the message and together we can eradicate viral hepatitis.

# New HEPHeroes



Anne Craigie



Lucia Tran

**I** am a HEPHero because I'm part of an amazing team of clinicians working hard to achieve the goal of elimination of hepatitis in prisons.

I am a nurse who has worked in lots of different health care settings...always seem to end up working in prison health care. Prison patient populations are disproportionately affected by blood borne viruses.

Prison patient populations are disproportionately affected by blood borne viruses... People in prison are primarily the most disadvantaged and vulnerable to the consequences of this stark health inequality.

Working as a nurse in prisons, I can't ignore that over representation, and for me, it makes you look at the whole picture. People in prison are primarily the most disadvantaged and vulnerable to the consequences of this stark health inequality.



## Anne's Message

Education and open discussion about hepatitis assists in breaking down myths and the resultant discrimination against people with hepatitis. The 'message out' is essential to achieving elimination.

**I** am a HEPHero because I want to contribute my knowledge of reducing the burden of hepatitis and help the community to actively protect themselves.

I am a Vietnamese woman doing a Masters of Public Health and I am strongly interested in health research. My background was mixed public health and medicine. In Vietnam, I practised in hospitals and witnessed many people living with hepatitis B and hepatitis C in all stages of the disease. Some were even diagnosed with liver cancer.

Once the community acknowledges the importance of viral hepatitis and how and where to seek help. They will be more responsible for their health.

After graduating, I worked at a vaccination centre where I directly consulted with the community to administer vaccines to prevent diseases, in particular, hepatitis B. With a relatively high rate of hep B and its high risk of turning into cancer, vaccination is certainly the key to preventing the disease.

Once the community acknowledges the importance of viral hepatitis and how and where to seek help. They will be more responsible for their health.



## Lucia's Message

Hepatitis B is preventable and hepatitis C is treatable. It is no reason to discriminate against people with the disease if you know how to protect yourself and your family.

# New HEPHeroes



## Dr. Fran Bramwell



**I** am a HEPHero because I believe people with viral hepatitis have a right to better health and I enjoy my role in this journey.

I became aware of the consequences of chronic viral hepatitis whilst working overseas in developing countries. I was even involved in mass vaccination campaigns that I now realise may have spread viral hepatitis. In emergency situations, these days different technologies and resources are much improved.

In 2001, I moved from the refugee health sector to work with people who inject drugs. I have been an advocate for primary care management of hepatitis C since then and despite opposition from some within the tertiary sector have persevered. Until 2016 the numbers our team at Health Works have treated have been minuscule.

I am a HepHero because I believe people with viral hepatitis have a right to better health and I enjoy my role in this journey.

The evolution of the Direct Acting Antivirals for the treatment and cure of hepatitis C has made the eradication of hepatitis C within reach. Our work needs to continue to ensure all people who inject have expanded access to safe injecting equipment, hepatitis B vaccination and HIV prevention measures.

The message that there is safe, effective, short duration treatment of hepatitis C needs to be common knowledge in all communities, not just in communities that are more directly affected by the epidemic. I really feel that there needs to be a coordinated whole-of-Australia awareness campaign.

Using those from affected communities such as people who inject or people from countries of high viral hepatitis prevalence to inform and assist in the development and implementation, will ensure that messages are sensitive, relevant and de-stigmatising.

The biggest barrier to the success of current campaigns and treatment initiatives is the enormous stigma associated with both hepatitis C and hepatitis B.

Whole of population education and increased engagement of the health and social welfare sectors with affected groups such as injecting drug users would increase treatment uptake and also assist in the long-term engagement with health providers around an issue that is about achieving a positive health outcome i.e. the cure of hepatitis C or the optimal management of hepatitis B.

Australia has a major role to play in showcasing our commitment and assisting our neighbours. I have learnt so much from the people I see in clinic and also from approaches to communicable disease health promotion in Asia and Africa. We can share our knowledge and experiences and work together towards eradication of hepatitis C and improved management of hepatitis B.



### Fran's Message

Viral hepatitis is everyone's business. We all have a role to play in the prevention of viral hepatitis through our actions in society and/or as a worker. It is only through collective action and breaking down stigma and discrimination that we will decrease the burden of viral hepatitis.





## Associate Professor Tilman Ruff



**I** am a HEPHero because I've had the privilege of being involved pretty much from the beginning in promoting the use of the extraordinarily effective and safe vaccine against hepatitis B. Initially the vaccine was costly and hardly used. The immense burden of hepatitis B and its consequences were poorly understood.

Now I have the pleasure of seeing the remarkable control of hepatitis B which can be achieved even in countries with very high rates of infection in little more than a decade when high rates of immunisation are achieved among infants, starting at birth.

I trained as an infectious diseases physician, and began working in travel medicine, public health and preventive medicine, enthralled by the amazing power of vaccines and immunisation. Currently I'm Associate Professor at the Nossal Institute for Global Health at the University of Melbourne, and for over 20 years I've been the international medical advisor for the Australian Red Cross.

My main work in recent years has been on the urgent global health imperative to ban and eliminate nuclear weapons, the most acute existential threat we face. I'm a co-president of International Physicians for the Prevention of Nuclear War, which won a Nobel Peace Prize for its work.

I was the founding chair of the International Campaign to Abolish Nuclear Weapons, which has been the main civil society partner working with the 122 governments which concluded a historic treaty to ban nuclear weapons at the UN in New York in July 2017. ICAN was awarded the 2017 Nobel Peace Prize for its endeavours in October. Like hepatitis B, nuclear war can be prevented and nuclear weapons eradicated.

In the late 80s I became involved at the invitation of Professor Ian Gust, a wonderful mentor, in the first rollout of hepatitis B immunisation in Indonesia, figuring out how to deliver a birth dose to babies who were mostly born at home. We showed it could be done effectively and safely, and be a platform for delivering other important elements of postnatal care for mothers and newborns.

The lessons we learnt were applied across Indonesia, with more than 5 million babies born each year. Then for about 20 years I assisted national immunisation programs in Pacific island countries with hepatitis B control and more broadly, working with WHO and UNICEF.

Now I serve on an expert committee on hepatitis B control for the Western Pacific Region of WHO, helping countries check how their immunisation and hepatitis B control programs are going and working with them to figure out how to make them work better.

There is still a lot to be done to utilise the powerful vaccine we have most effectively, and get it to everyone who needs it, in time before they become infected. We've also learnt a lot about how to look after people living with hepatitis B, monitor and treat them, and protect their susceptible contacts.

Because the diagnosis requires a blood test, and the infection may not be evident, there are still many people who don't know they're infected and so can't access appropriate care. Hopefully we'll have better tools for treatment in not too many more years.

Some of the antivirals that are central to treatment are also important in prevention, such as in preventing infants being infected from their mothers around the time of birth.



PODCAST: Listen to an interview with Tilman on Hepatitis Victoria's website: [www.hepvic.org.au](http://www.hepvic.org.au)



### Tilman's Message

Learn about hepatitis B, prevent it with timely immunisation for all infants and everyone else who needs it. For those living with hepatitis B, accessing good monitoring and care is important and only possible if people know they're infected. That means dealing with stigma that is still too common.

# Healthy food swaps

If you are asked for help and support, like me the chances are the answer is yes. But when it comes to your liver that can't ask but may need the help, try these simple swaps in recognition of all the hard work our liver puts in.

## Simple and easy food-swaps to keep healthy

In diet terms the liver plays a central role in all metabolic processes in the body. When metabolising fat, the liver breaks down the fats and produces energy.

### Milk chocolate to dark chocolate

Dark chocolate contains less than half the sugar of milk chocolate. Dark chocolate also contains beneficial antioxidants and tastes great.

### White rice to brown rice

White rice is simply a refined starch. Any of the original nutrients have been largely removed. Do better for your body and go to brown. It's full of fiber, easier to digest, and will make you feel fuller.

### White bread to wholegrain

Removing the bran in white bread also removes key nutrients, including vitamins, minerals, healthy fats, protein, and fibre. Go to wholegrain and reap the benefits.

### Cheddar cheese to cottage cheese

100 grams of Cottage cheese has 98 calories – which is surprisingly low for cheese. Standard cheddar has 402 calories per 100 grams. In comparison, that sounds a lot.

### Granola to oatmeal

Granola tastes great but it's loaded with sugar. In comparison oatmeal on its own seems fairly boring but you can jazz it up. Honey is an example that adds sweetness.

### Fried chips to roasted sweet potato wedges

Now this will take a little longer than the bag variety. Cut as you would for chips and coat sweet potatoes with a light spray of olive oil. Spread in single layer on prepared baking sheet. Bake until tender and golden brown for about 20 mins. Lightly salt as a reward for all that work you put in.

### Butter to avocado

Avocado is the go to for vegans and they put avocado to good use baking recipes and use in body moisturizer. I keep it simple and use as a replacement to butter in salad rolls.

### Yogurt to sour cream

A straight up substitution to use in cakes and slices.

### Tortilla wraps to lettuce wrap

Now this one is hard to get around, but think about the taste of a Vietnamese spring roll without the lettuce leaf. Not as good at all!

## Top 10 Healthy lifestyle choices



Photo: Tourism Tasmania and Glenn Gibson

### 1. Lead an active lifestyle

Being physically active can decrease your chance of developing serious conditions such as diabetes and heart disease, and helps prevent a range of other conditions. If you have a chronic condition such as heart disease, high blood pressure, diabetes or arthritis, you can improve the condition by exercising safely.



### 2. Maintain a healthy weight

If you weigh too much or too little it certainly can be bad for your health. It can even cause serious conditions, such as heart disease and cancer.

- |                        |                                      |
|------------------------|--------------------------------------|
| 3. Don't smoke         | 8. Maintaining good personal hygiene |
| 4. Don't drink         | 9. Managing stress                   |
| 5. Eat a balanced diet | 10. Have a positive outlook          |
| 6. Keep hydrated       |                                      |
| 7. Get enough sleep    |                                      |

# Hepatitis Victoria's Stigma and Discrimination Forum

*Exploring the complexities of hepatitis-related stigma and discrimination from personal and professional perspectives*

Sunday the 3 December is International Day of Disabled Persons 2017. Although not well known, hepatitis B and C are disabilities as defined by discrimination law. To recognise this day, Hepatitis Victoria is hosting a forum addressing hepatitis-related stigma and discrimination... Come along and learn from people's personal and professional experiences of stigma and discrimination.

**Time:** 9:30am – 12:30pm

**Date:** Thursday 7 December, 2017

**Location:** Yarra Room, Level 2, Melbourne Town Hall,  
Corner of Collins and Swanston Streets Melbourne VIC 3000

Do you have a good understanding of behaviours that can be stigmatising?  
Do you know when stigmatising behaviours become discrimination, legally?

Would you know what to do if you, or someone you know, experiences  
stigma, discrimination or privacy breaches?

Event registration is free! [www.hepvic.org.au/events](http://www.hepvic.org.au/events) Please RSVP by Monday 4th December

**HEPATITISVICTORIA**

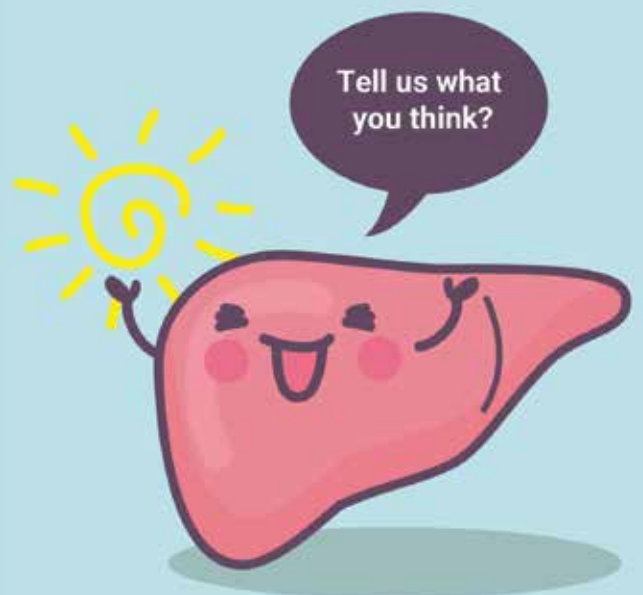
## We're doing all the talking... now we'd love you to tell us what you think.

Hepatitis Victoria wants to ensure we are communicating with you in the best possible way, providing information that is useful in all the formats you want.

- Do you read *Good Liver Magazine*, *HepChat* or engage with our social media platforms and websites?
- How do you find them?
- Can they be improved?
- Are you interested in podcasts, video, blogs or more social channels?

We are very keen to hear what you think is the best way for us to listen and talk to you. Please take a moment to tell us what content you enjoy and what you'd like to see more of...?

*You can fill in the short survey on our website, or if you prefer we can send you a hard copy of the survey to fill in.*



[www.hepvic.org.au/page/1257/have-your-say](http://www.hepvic.org.au/page/1257/have-your-say)

Contact Mark Pearce on **03 9385 9107** or Shaun Knott on **03 9385 9106**

# Liver clinics and liver specialists

## Albury

**Albury Community Health - Hepatitis Clinic**  
596 Smollett Street, Albury  
Contact: (02) 6058 1800  
Fax: (02) 6058 1801

## Bairnsdale

**Bairnsdale, Regional Hospital,**  
Specialist Consulting Rooms  
122 Day Street, Bairnsdale  
Contact: (03) 5150 3478  
Fax: (03) 5150 3404

## Ballarat

**Ballarat Health Services**  
577 Drummond Street North, Ballarat  
Contact: (03) 5320 4211  
Fax: (03) 5320 4097

**Ballarat Community Health**  
12 Lilburne Street, Lucas  
Contact: (03) 5338 4500

## Bendigo

**Bendigo Health**  
Lucan Street, Bendigo  
Contact: (03) 5454 8422  
Fax: (03) 5454 8419

## Bentleigh East

**Moorabin Specialist Centre (Private)**  
873 Centre Road, Bentleigh East  
Contact (03) 9579 0100  
Fax: (03) 9563 7554

## Berwick

76 Clyde Street, Berwick  
Contact: (03) 9796 1500  
Fax: (03) 9796 1300

## Box Hill

**Box Hill Hospital**  
8 Arnold Street, Box Hill 3128  
Contact: (03) 9895 3352 (OPD)  
1300 342 255 (General)

## Caulfield South

**Caulfield Endoscopy (Private)**  
544 Hawthorn Road, Caulfield South  
Contact: (03) 9595 6666  
Fax: (03) 9595 6611  
Email: info@caulfieldendoscopy.com.au

## Clayton

**Southern Health Monash Medical Centre**  
246 Clayton Road, Clayton  
Contact: (03) 9594 6666  
Fax: (03) 9594 6111  
Email: outpatient.enquiries@monashhealth.org

## Coburg

**John Fawkner Private Hospital (Private)**  
275 Moreland Road, Coburg  
Contact: (03) 9385 2500  
Fax: (03) 9385 2170

## Cranbourne

**Cranbourne Integrated Care -  
Monash Health**  
140 -154 Sladen Street, Cranbourne  
Contact: (03) 5990 6789  
Fax: (03) 5990 6350

## East Ringwood

**Maroondah Hospital – Eastern Health**  
Davey Drive, Ground Floor Outpatients.  
East Ringwood  
Contact: (03) 9879 1570  
Email: outpatients@easternhealth.org.au

## Eltham

(Dr. Tony, Dr Michealson, and weakly visiting  
Hepatitis C nurse Rhonda O'Malley)  
1170 Main Road, Eltham.  
Contact: (03) 9496 6846  
Fax: 9496 2732  
Email: Rhonda.o'malley@austin.org.au

## Epping

**Northern Hospital**  
185 Cooper Street, Epping  
Contact: (03) 8405 8000  
Fax: (03) 8405 8761  
**Epping Medical Centre**  
230 Cooper Street  
Contact: (03) 8401 1777  
Fax: (03) 8401 1788

## Fitzroy

**St. Vincent's Hospital**  
35 Victoria Parade, Fitzroy  
Contact: (03) 9288 3771  
Fax: (03) 9288 3489

## Footscray

**Western Hospital**  
148 Gordon Street, Footscray  
Contact: (03) 8345 6666  
Fax: (03) 8345 6856

## Frankston

**Peninsula Liver Clinic (Private)**  
141 Cranbourne Road, Frankston  
Contact: (03) 9770 0139  
Fax: 9781 2644

## Geelong

**University Hospital Geelong**  
292-322 Ryrie Street, Geelong  
Contact: (03) 4215 1396  
Fax: (03) 4215 1385  
155 Guthridge Parade, Sale.

## Gippsland

**Central Gippsland Health Services**  
155 Guthridge Parade, Sale  
Contact: (03) 5143 8600

## Heidelberg

**Austin Liver Clinic**  
145 Studley Road, Heidelberg  
Contact: (03) 9496 2787  
Fax: (03) 9496 2732

## Malvern

**Victorian HepatoPancreato  
Biliary Surgery Group. (Private)**  
29/183 Wattletree Road, Malvern  
Contact: (03) 9508 1222  
Fax: (03) 9509 1522

## Cabrini Hospital (Private)

183 Wattletree Road, Malvern  
Contact: (03) 9508 1222  
Fax: (03) 9508 1098

## Maroondah

**Maroondah Hospital –  
Eastern Health (Outpatients)**  
Ground Floor, Davey Drive, Ringwood East  
Contact: (03) 9895 3333  
Fax: (03) 9895 4852

## Melbourne

**Alfred Centre, Gastroenterology Department**  
Ground Floor, 99 commercial Road, Melbourne  
Contact: (03) 9076 2223  
Fax: (03) 9076 2194

## Melbourne City Gastroenterology (Private)

Mailing address: Melbourne City  
Gastroenterology  
PO Box 2159  
Royal Melbourne Hospital  
Contact: 1300 700 789

## Melbourne East

**Melbourne GI & Endoscopy (Private)**  
130-132 Grey Street, East Melbourne  
Contact: (03) 9417 5306

## Mildura

**Mildura Base Hospital**  
231-237 Thirteenth Street, Mildura  
Contact: (03) 5022 3333  
Fax: (03) 5033 3228

## Mitcham

**Mitcham Private Hospital – consulting rooms  
(Private)**  
23 Doncaster East Road, Mitcham  
Contact: (03) 9210 3146  
Fax: (03) 9210 3139

## Moonee ponds

**Moonee ponds Gastrolab (Private)**  
Suite 1, Level 1,  
28 Young Street, Moonee Ponds  
Contact: (03) 9331 3122  
Fax: (03) 9331 3133

## Moonee Valley Specialist Centre (Private)

Private Facility, including Fibroscan.  
Ground Level  
767 Mt Alexander Road Moonee Ponds  
Contact: (03) 9372 0372

## Parkville

**Royal Melbourne Hospital, Infection Diseases  
Department, OPD**  
Ninth floor, 300 Grattan Street (Corner of Royal  
Parade), Parkville  
Contact: (03) 9342 7212  
Fax: (03) 9342 7277

# Contacts

## Community-based Hepatitis C Treatment Services

### Prahran

**Alfred Hospital, Infectious Diseases Department**  
55 Commercial Road, Prahran  
Contact: (03) 9076 6081  
Fax: (03) 9076 6528

### Preston

**Victorian Aboriginal Health Services**  
Wednesdays 9.00-4.00pm  
238-250 Plenty Road Preston  
Phone: 9403 3300 for an appointment or drop in.

### Richmond

**The Epworth Centre (needs referrals)**  
Suite 7.6 Erin Street, Richmond  
Contact: (03) 9428 9908  
Fax: (03) 9421 3432

### Shepparton

**Goulburn Valley Health Outpatients**  
Graham Street, Shepparton  
Telephone: (03) 5832 3600  
Fax: (03) 5831 6032

### Springvale

**Springvale Community Health – Monash Medical Centre**  
55 Buckingham Avenue, Springvale  
Contact: (03) 9594 3088

### Traralgon

**Latrobe Regional Hospital**  
Private Consulting Suites 3 and 4  
Princes Highway, Traralgon West.  
Contact: (03) 5173 8111  
Fax: (03) 5173 8097

### Wantirna

**Knox Private Hospital – consulting rooms (Private)**  
262 Mountain Highway, Wantirna  
Contact: (03) 9210 7300  
Fax: (03) 9210 7301

### Warrnambool

**Western Region Alcohol and Drug Centre**  
(limited hepatitis treatment services)  
172 Merri Street, Warrnambool  
Contact: 1300 009 723  
Fax: (03) 5564 5700

### West Heidelberg

**Banyule Community Health Centre**  
21 Alamein Road, West Heidelberg.  
Contact: (03) 9496 6846

### Wodonga

**Murray Valley (Private) Hospital**  
Nordsvan Drive, Wodonga.  
Contact: (02) 6056 3366  
Fax: (02) 6056 3466

### Gateway Health

155 High Street, Wodonga  
Contact: (02) 6022 8888  
Fax: (02) 6024 5792

*Community based treatment clinics have been developed to enable more people to access treatment in their local communities.*

### Ballarat

**Ballarat Community Health**  
12 Lilburne Street, Lucas  
Contact: (03) 5338 4500

### Braybrook

**Braybrook Community Health Service**  
cohealth  
Contact: (03) 9448 5507  
107 - 139 Churchill Avenue, Braybrook

### Coburg

**St. Kyrollos Family Clinic**  
2A Moore Street, Coburg  
Contact: (03) 9386 0900  
Fax: (03) 9386 5388

### Coburg

**Uniting Care Re Gen**  
26 Jessie Street, Coburg  
Contact: (03) 9386 2876

### Collingwood

**coHealth (formerly North Yarra Community Health)**  
365 Hoddle Street, Collingwood  
Contact: (03) 9448 5528  
Email: info@cohealth.org.au

### cohealth INNERSPACE

4 Johnston Street, Collingwood  
Contact (03) 9448 5530  
Email: info@cohealth.org.au

### Fitzroy

**cohealth**  
75 Brunswick Street Fitzroy  
Contact: (03) 9411 3555

### Footscray

**Health Works**  
4 -12 Buckley Street, Footscray  
Contact: Contact: (03) 9448 5511

### Footscray

**cohealth**  
78 Paisley Street Footscray,  
Tel: (03)9448 5502.

### Frankston

**SHARPS, NSP + Community health**  
Drop in/NSP Service Monday–Friday 9.00–5.00  
20 Young Street, Frankston  
Contact: (03) 9781 1622.

NSP Outreach Service 1800 642 287.  
6.30pm – 9.45 pm then phones off but deliveries till 10.00 -10.30 pm

Alfred Hospital Hep C Nurse visits Tuesdays 9.00–5.00 – pathology, fibroscans links for treatment and GPs.

### Melbourne

**Living Room, Youth Projects**  
(Hepatitis programs – Thursdays every fortnight)  
7 – 9 Hosier Lane, Melbourne  
Contact: (03) 9662 4488  
Email: livingroom@youthprojects.org.au

### Nunawading

**Nunawading Clinic**  
176 Springvale Road, Nunawading  
Contact: (03) 9878 9191  
GP available Monday and Tuesday 8.30- 5.00  
Friday 8.30 – 12.00

### Richmond

**North Richmond Community Health**  
(Hepatitis C nurse visits every Wednesday)  
23 Lennox Street, Richmond  
Contact: (03) 9418 9800  
Email: nrch@nrch.com.au

### St. Kilda

**St Vincent's Integrated Hepatitis C Service**  
60 Barkley Street, St. Kilda  
Contact: (03) 9534 0531

### FIRST STEP

42 Carlisle Street, St Kilda  
Contact: (03) 9537 3177  
Doctors with hepatitis knowledge available daily.  
Hepatitis Nurses available only on Monday and Friday. Pathology and Fibroscans available on site.

### Access Health

31 Grey Street, St Kilda  
Contact: (03) 9076 6081

### St Vincent's Integrated Hepatitis C Service

60 Barkly Street, St Kilda  
Contact: (03) 9534 0531

### Warragul, Morwell, Sale

**La Trobe Community Health Service,**  
Hepatitis C Nurse  
1800 242 696

### Werribee

**Werribee Mercy Hospital consulting suites**  
300 Princess Highway, Werribee  
Contact: (03) 9386 2259

### Wodonga

**Gateway Health**  
155 High Street, Wodonga. 3690  
Contact (02) 6022 8888.  
NSP Hours: Monday–Friday 9.00–5.00  
Hepatitis C Clinic Monday, Tuesday  
Also provide: Pharmacotherapy prescriber

# Contacts

## Needle and Syringe Programs

### Alexandra

**Alexandra Community Health Services – Needle Exchange Program**  
12 Cooper Street, Alexandra  
Contact: (03) 5772 0900  
Fax: (03) 5772 0919  
Email: alexandrachs@humehealth.org.au

### Altona

**Martin Didzy's Pharmacy**  
8 Harrington Square, Altona  
Contact: (03) 9398 1309 Fax: (03) 9398 1309

### Altona Meadows

**Isis Primary Care**  
330 Queens Street, Altona Meadows  
Contact: (03) 8368 3000  
Fax: (03) 9360 7534

### Apollo Bay

**Otway Health & Community Services**  
75 McLachlan Street, Apollo Bay  
Contact: (03) 5237 8500  
Fax: (03) 5237 6172  
Email: otwayhealth@swarh.vic.gov.au

### Ararat

**Priceline Pharmacy**  
119 Barkly Street, Ararat  
Contact: (03)5352 1007

### Bairnsdale

**Bairnsdale Community Health Centre – Needle and Syringe Program**  
48 Ross Street, Bairnsdale  
Contact: (03) 5152 0222  
Email: email@brhs.com.au  
NSP 8.30 – 4.30 Monday – Friday

**Bairnsdale Community Health Centre – Emergency Department offer needles 24/7**  
51 Day Street, Bairnsdale  
Contact: (03) 5150 3333  
Fax: (03) 5152 6784  
Email: email@brhs.com.au

### Belgrave

**Inspiro Community Health Service**  
1624 Burwood Highway, Belgrave  
Contact: (03) 9738 8801  
Fax: (03) 9739 4689  
Email: hello@inspiro.org.au

### Belmont

**Barwon Health – Needle and Syringe Program**  
1-17 Reynolds Road, Belmont  
Contact: (03) 4215 6800  
Fax: (03) 4215 6839  
Email: receptionbelmont@barwonhealth.org.au

### Benalla

**Benalla Community Health**  
45 Coster Street, Benalla  
Contact: (03) 5761 4222  
Fax: (03) 5761 4502  
Email: communityhealth@benallahealth.org.au

### Bendigo

**Bendigo Central Secondary NSP**  
Bendigo Community Health Service  
171 Hargreaves Street, Bendigo  
Contact: (03) 5448 1600

After hours:

**Bendigo Community Health Service Mobile Outreach NSP**  
Tuesday-Saturday  
7.30–10.45pm  
Contact: 1800 636 514

**Bendigo Community Health Service Mobile Drug Safety Worker**  
13 Helm Street, Kangaroo Flat  
Contact: 0409 326 460

### Bentleigh East

**Bentleigh Bayside Community Health, Glen Eira Site**  
2A Gardeners Road, Bentleigh East  
Contact: (03) 9575 5333  
Fax: (03) 9579 3623  
Email: info@bbch.org.au

### Blackburn South

**Priceline Pharmacy Blackburn**  
109 Canterbury Road, Blackburn South  
Contact: (03) 9877 2525  
Fax: (03) 9877 2522

### Braybrook

**cohealth, Braybrook Community Centre**  
107-139 Churchill Avenue, Braybrook  
Contact: (03) 9334 6699  
Fax: (03) 9312 3507

### Broadmeadows

**Dianella Community Health**  
42-48 Coleraine Street, Broadmeadows  
Contact: (03) 8301 8888  
Fax: (03) 8301 8889

### Brunswick

**Merri Community Health Services**  
11 Glenlyon Road, Brunswick  
Contact: (03) 9367 6711  
Fax: (03) 9387 5417  
Email: mchs@mchs.org.au

### Camperdown

**Manifold Place Community Health Centre**  
140 Manifold Street, Camperdown  
Contact: (03) 5593 1892  
Fax: (03) 5593 2010  
Email: MPlace2@swh.net.au

### Cann River

**Cann Valley Bush Nursing Centre**  
27 Monaro Highway, Cann River  
Contact: (03) 5152 6210  
Fax: (03) 5158 6409

### Carlton

**Melbourne Sexual Health Centre**  
580 Swanston Street, Carlton  
Contact: (03) 9341 6200  
Fax: (03) 9341 6279  
Email: enquiries@mshc.org.au

### Carlton North

**cohealth, Carlton North Centre**  
622 Lygon Street, Carlton North  
Contact: (03) 9349 7333  
Fax: (03) 9349 7300  
Email: info@cohealth.org.au

### Castlemaine

**Castlemaine District Community Health Centre**  
13 Mostyn Street, Castlemaine  
Contact: (03) 5479 1000  
Fax: (03) 5472 3221  
Email: email@cdch.com.au

### Caulfield

**Caulfield Community Health Service – Alfred Health**  
260 Kooyong Road, Caulfield  
Contact (03) 9076 6666  
Fax: (03) 9046 4060  
Email: access@cgmc.org.au

### Chelsea

**Central Bayside Community Health Service**  
3/1 The Strand, Chelsea  
Contact: (03) 9782 7633  
Fax: (03) 9782 7600  
Email: info@cbchs.org.au

### Churchill

**Latrobe Community Health Service**  
20 - 24 Philip Parade, Churchill  
Contact: 1800 242 696  
Fax: (03) 8746 1100  
Email: info@lchs.com.au

### Cobram

**Cobram District Health**  
24 - 32 Broadway Street, Cobram  
Contact: (03) 5871 0777  
Fax: (03) 5872 2406

### Coburg

**Merri Community Health Services**  
93 Bell Street, Coburg  
Contact: (03) 9350 4000  
Fax: (03) 9350 1518  
Email: mch@mchs.org.au

### Cockatoo

**Monash Health Community Services**  
7 - 17 McBride Street, Cockatoo  
Contact: (03) 5968 7000  
Fax: (03) 5968 7030  
Email: MHCAccess@monashhealth.org

### Colac

**Colac Area Health**  
2-28 Connor Street, Colac  
Contact: (03) 5232 5100  
Email: dmelville@cah.vic.gov.au

## Collingwood

**cohealth**  
4 Johnston Street, Collingwood  
Contact: (03) 9468 2800  
Fax: (03) 9417 1499  
Email: info@innerspace.org.au

365 Hoddle Street, Collingwood  
Contact: (03) 9411 4333  
Fax: (03) 9411 4300  
Email: info@cohealth.org.au

## Corio

**Barwon Health - Needle Syringe Program**  
2 Gellibrand Street, Corio  
Contact: (03) 4215 7100  
Fax: (03) 4215 7193

## Corryong

**Upper Murray Health and Community Services**  
20 Kiell Street, Corryong  
Contact: (03) 6076 3200  
Fax: (03) 6076 1739  
Email: Enquiries@umhcs.vic.gov.au

## Cranbourne

**Monash Health Community**  
140 - 154 Sladen Street, Cranbourne  
Contact: (03) 5990 6789  
Fax: (03) 5990 6328

## Dandenong

**Community Access Partnership (CAP)**  
84 Foster Street, Dandenong  
Contact: (03) 9792 7630  
Fax: (03) 9794 0979  
Email: SEADS@monashhealth.org.au

## Deer Park

**Graeme Wurm Pharmacy**  
104 Station Road, Deer Park  
Contact: (03)9363 4204  
Fax (03) 9363 3342

## Drysdale

**Bellarine Community Health**  
21 Palmerstone Street, Drysdale  
Contact: (03) 5251 2291  
Fax: (03) 5258 0864

## Eaglehawk

**Bendigo Community Health Services, Eaglehawk**  
3 Seymoure Street Eaglehawk  
Contact: (03) 5434 4300  
Fax: (03) 5434 4355  
Email: bchs@bchs.com.au

## Echuca

**Echuca Regional Health**  
226 Service Street, Echuca  
Contact: (03) 5485 5000  
Fax: (03) 5482 5478  
Email: erhexec@erh.org.au

## Eltham

**Nillumbik Health**  
917 Main Road, Eltham  
Contact: (03) 9430 9100  
Fax: (03) 9431 0339  
Email: nchs@nillumbikhealth.org.au

## Epping

**Plenty Valley Community Health**  
187 Cooper Street, Epping  
Contact: (03) 9409 8787  
Fax: (03) 9408 9508

## Euroa

**Euroa Health**  
36 Kennedy Street, Euroa  
Contact: (03) 5795 0200  
Fax: (03) 5795 0240  
Email: eh@euroahealth.com.au

## Fitzroy

**Turning Point Alcohol & Drug Centre**  
54-62 Gertrude Street, Fitzroy  
Contact: (03) 8413 8413  
Fax: (03) 9416 3420  
Email: info\_group@turningpoint.org.au

## cohealth

75 Brunswick Street, Fitzroy  
Contact: (03) 9411 3555  
Fax: (03) 9411 3500  
Email: info@cohealth.org.au

## Fitzroy North

**Silverii's Pharmacy**  
333 St Georges Road, Fitzroy North  
Contact: (03) 9481 0671  
Fax: (03) 9482 6855

## Footscray

**Health Works, cohealth**  
4-12 Buckley Street, Footscray  
Contact: (03) 9362 8100  
Fax: (03) 8362 8180

## Frankston

**Frankston City Council**  
30 Davey Street, Frankston  
Contact: (03) 9784 1888  
Fax: (03) 9784 1094

## Frankston Integrated Health Centre

12-32 Hastings Road, Frankston  
Contact: (03) 9784 8100  
Fax: (03) 9784 8149

## Southern Hepatitis/HIV/AIDS Resources & Prevention Services (SHARPS)

20 Young Street, Frankston  
Contact: (03) 9781 1622  
Fax: (03) 9781 3669  
Email: customer.relation@phcn.vic.gov.au

## Geelong

**Wathaurong Aboriginal Cooperative**  
62 Morgan Street, Geelong North  
Contact: (03) 5277 2038  
Fax: (03) 5277 3537  
Email: healthservice@wathaurong.org.au

## Glenroy

**Youth Projects – Foot Patrol Needle and Syringe Program**  
6 Hartington Street, Glenroy  
Contact: (03) 9304 9100  
Fax: (03) 9304 9111  
admin@youthprojects.org.au

## Gisborne

**Macedon Ranges Health**  
5 Neal Street, Gisborne  
Contact: (03) 5428 0300  
Fax: (03) 5428 0399  
Email: healthcare@mrh.org.au

## Greensborough

**Banyule Community Health Service, Greensborough Centre – Needle Syringe Program**  
Unit 3, 25-33 Grimshaw Street, Greensborough  
Contact: (03) 9433 5111  
Fax: (03) 9435 8922  
Email: banyule@bchc.org.au

## Hastings

**Hastings Community Health Service**  
185 High Street, Hastings  
Contact: (03) 5971 9100  
Fax: (03) 5971 9106

## Hawthorn

**Swinburne University Health Services**  
Level 4, George Swinburne Building,  
34 Wakefield Street, Hawthorn  
Contact: (03) 9214 8483  
Fax: (03) 9818 7548  
Email: healthservice@swin.edu.au

## Healesville

**Healesville & District Hospital – Needle Exchange Program**  
377 Maroonah Highway, Healesville  
Contact: (03) 5962 4300  
Fax: (03) 5962 3429

## Heidelberg West

**Banyule Community Health Service – Needle Syringe Program**  
21 Alamein Road, Heidelberg West  
Contact: (03) 9450 2000  
Fax: (03) 9459 5808  
Email: banyule@bchs.org.au

## Horsham

**Wimmera Health Care Group**  
83 Baillie Street, Horsham  
Contact: (03) 5381 9111  
Fax: (03) 5381 9196  
Email info@whcg.org.au

## Kangaroo Flat

**Bendigo Community Health Services, Kangaroo Flat Site**  
13 Helm Street, Kangaroo Flat  
Contact: (03) 5430 0500  
Fax: (03) 5430 0544  
Email: bchs@bchs.com.au

# Contacts

## Kyneton

**Cobaw Community Health Service**  
47 High Street, Kyneton  
Contact: (03) 5421 1666  
Fax: (03) 5422 2161  
Email: admin@cobaw.org.au

## Lakes Entrance

**Gippsland Lakes Community Health Centre**  
18-26 Jemmeson Street, Lakes Entrance  
Contact: (03) 5155 8300  
Fax: (03) 5155 4057  
Email: contact@glch.org.au

## Leongatha

**Gippsland Southern Health Services**  
Koonwarra Road, Leongatha  
Contact: (03) 5667 5555  
Fax: (03) 5667 5516  
Email: info@gshs.com.au

## Lilydale

**Inspiro Community Health Service**  
17 Clarke Street, Lilydale  
Contact: (03) 9738 8801  
Fax: (03) 9739 4689  
Email: hello@inspiro.org.au

## Lochsport

**Loch Sport Community Health Centre**  
1 National Park Road, Loch Sport  
Contact: (03) 5146 0349  
Fax: (03) 5146 0780  
Email: lochsport@cghs.com.au

## Lucas

**Ballarat Community Health Centre – Needle Syringe Program**  
12 Lilburne Street, Lucas  
Contact: (03) 5338 4500  
Fax: (03) 5332 6617  
Email: info@bchc.org.au

## Maffra

**Maffra District Hospital**  
48, Kent Street, Maffra  
Contact (03) 51470100  
Maffra.admin@cghs.com.au

## Mansfield

**Mansfield District Hospital**  
53 Highett Street, Mansfield  
Contact: (03) 5775 8800  
Fax: (03) 5775 1352  
Email: reception.main@mdh.org.au

## Maryborough

**Community Services Maryborough**  
75-87 Clarendon Street, Maryborough  
Contact: (03) 5461 0400  
Fax: (03) 5461 4489

## Melbourne

**Melbourne City Council**  
200 Little Collins Street, Melbourne  
Contact: (03) 9658 9658  
Fax: (03) 9658 9685

## Melton

**Djerriwarrh Health Service**  
Yuille Street, Melton  
Contact: (03) 8746 1100  
Fax: (03) 9743 8640

## Mildura

**Sunraysia Community Health Service**  
137 Thirteenth Street, Mildura  
Contact: (03) 5022 5444  
Fax: (03) 5022 5445  
Email: schs@schs.com.au

## Moe

**Latrobe Community Health Services**  
42-44 Fowler Street, Moe  
Contact: 1800 242 696  
Fax: (03) 5127 7002  
Email: info@lchs.com.au

## Mornington

**Mornington Community Information and Support Centre**  
320 Main Street, Mornington  
Contact: (03) 5975 1644  
Fax: (03) 5975 5423  
Email: manager@mcisc.org.au

## Morwell

**Latrobe Community Health Service**  
81-87 Buckley Street, Morwell  
Contact: 1800 242 696  
Fax: (03) 5136 5450  
Email: info@lchs.com.au

## Myrtleford

**Gateway Health**  
32 Smith Street, Myrtleford  
Contact: (03) 5731 3500  
Fax: (03) 5751 1822  
Email: info@gatewayhealth.org.au

## Newcomb

**Newcomb Community Health Centre – Needle Syringe Program**  
104-108 Bellarine Highway, Newcomb  
Contact: (03) 4215 7520  
Fax: (03) 4215 7795  
Email: receptionnewcomb@barwonhealth.org.au

## Northcote

**Darebin District Health Service**  
42 Separation Street, Northcote  
Contact: (03) 9403 1200  
Fax: (03) 9482 3690  
Email: info@dch.org.au

## Nowa Nowa

**Nowa Nowa Community Health**  
6 Bridge Street, Nowa Nowa  
Contact: (03) 5155 7294  
Fax: (03) 5155 7296  
Email: email@nnch.org.au

## Orbost

**Orbost Regional Health**  
104-107 Boundary Road, Orbost

Contact: (03) 5154 6666  
Fax: (03) 5154 2366  
Email: orh@orh.com.au

## Pakenham

**Monash Health Community**  
66-70 Princess Highway, Pakenham  
Contact: (03) 5941 0500  
Fax: (03) 5941 0542  
Email: mhaccess@monashhealth.org

## Portarlington

**Bellarine Community Health**  
39 Fenwick Street, Portarlington  
Contact: (03) 5258 6140  
Fax: (03) 5258 0864  
Email: intake@bch.org.au

## Portland

**Portland District Health**  
141-151 Bentinck Street, Portland  
Contact: (03) 5521 0333  
Fax: (03) 5521 8162  
Email: pdh@swarh.vic.gov.au

## Prahran

**Inner South Community health Needle Exchange Program**  
240 Malvern Road, Prahran  
Contact: (03) 9525 1300  
Fax: (03) 9521 2474  
Email: adminenquiries@ischs.org.au

## Preston

**Your Community Health PANCH**  
300 Bell Street, Preston  
Contact: (03) 8470 1111  
Fax: (03) 9485 9010  
Email: info@yourcommunityhealth.org.au

## Reservoir East

**Darebin Community Health**  
125 Blake Street, Reservoir East  
Contact: (03) 8470 1111  
Fax: (03) 8470 1107  
Email: info@dch.org.au

## Richmond

**North Richmond Community Health - Needle and Syringe Program (NSP)**  
23 Lennox Street, Richmond  
Contact: (03) 9418 9800  
Fax: (03) 9428 2269

## Ringwood

**EACH Ltd**  
46 Warrandyte Road, Ringwood  
Contact: 1300 003 224  
Fax: (03) 9870 4688  
Email: info@each.com.au

## Ringwood East

**EACH Ltd**  
75 Patterson Street, Ringwood East  
Contact: (03) 9837 3999  
Fax: (03) 9879 6356  
Email: info@each.com.au



### Rosebud

**Southern Peninsula Community Support and Information Centre**  
878 Point Nepean Road, Rosebud  
Contact: (03) 5986 1285  
Fax: (03) 5982 2601  
Email: admin@spsic.org

### Rosedale

**Rosedale Community Health Service**  
2-8 Cansick Street, Rosedale  
Contact: (03) 5199 2333  
Fax: (03) 5199 2980  
Email: rosedale@cghs.com.au

### Sale

**Central Gippsland Health Service, Division of Community Care**  
Palmerston Street, Sale  
Contact: (03) 5143 8800  
Fax: (30) 5143 8890  
Email: cs.reception@cghs.com.au

### San Remo

**San Remo Community Services**  
1 Back Beach Road, San Remo  
Contact: (03) 5671 9200  
Fax: (03) 5678 5595

### Sebastopol

**Ballarat Community Health Centre Doctors Clinic – Needle and Syringe Program**  
260 Vickers Street, Sebastopol  
Contact: (03) 5338 4585

### Shepparton

**Primary Care Connect**  
399 Wyndham Street, Shepparton  
Contact: (03) 5823 3200  
Fax: (03) 5823 3299  
Email: support@primarycareconnect.com.au

### South Melbourne

**Inner South Community Health Services**  
341 Coventry Street, South Melbourne  
Contact: (03) 9690 9144  
Fax: (03) 9696 7228  
Email: adminenquiries@ischs.org.au

### South Yarra

**Victorian AIDS Council/ Gay Men's Health Centre**  
6 Claremont Street, South Yarra  
Contact: (03) 9865 6700  
Fax: (03) 9826 2700  
Email: enquiries@vac.org.au

### Springvale

**Monash Health Community**  
55 Buckingham Avenue, Springvale  
Contact: (03) 8558 9080 OR (03) 8558 9000  
Fax: (03) 8558 9011  
Email: intakeGDCHS@southernhealth.org.au

### St. Albans

**Isis Primary Care**  
1 Andrea Street, St. Albans

Contact: (03) 9296 1200  
Fax: (03) 9366 2086

### Stawell

**Stawell Health & Community Centre**  
8-22 Patrick Street, Stawell  
Contact: (03) 5358 7400  
Fax: (03) 5358 4113  
Email: gch@grampianscommunityhealth.org.au

### St. Kilda

**Inner South Community Health Services**  
18 Mitford Street, St. Kilda  
Contact: (03) 9534 0981  
Fax: (03) 9525 3730  
**Resourcing Health and Education in the Sex industry (RhED)**  
10 Inkerman Street, St. Kilda  
Contact: 1800 458 752  
Fax: (03) 9525 4492  
Email: sexworker@sexworker.org.au

### Salvation Army Health Information Exchange

29 Grey Street, St. Kilda  
Contact: (03) 9536 7703  
Fax: (03) 9536 7778

### Sunbury

**Sunbury Community Health Centre**  
12-28 Macedon Street, Sunbury  
Contact: (03) 9744 4455  
Fax: (03) 9744 6777  
Email: admin@sunburychc.org.au

### Timboon

**Timboon & District Healthcare Services**  
21 Hospital Road, Timboon  
Contact: (03) 5558 6000  
Fax: (03) 5598 3565  
Email: timboon@swarh.voc.gov.au

### Torquay

**Torquay Community Health Centre – Needle and Syringe Program**  
100 Surf Coast Highway, Torquay  
Contact: (03) 4215 7800  
Fax: (03) 4215 7843  
Email: chrisinfoaccess@barwonhealth.or.au

### Traralgon

**Latrobe Community Health Services**  
Seymour Street, Traralgon  
Contact: 1800 242 696  
Fax: (03) 5171 1470  
Email: info@lchs.com.au

### Wangaratta

**Gateway Health**  
45-47 Mackay Street, Wangaratta  
Contact: (03) 5723 2000  
Fax: (03) 5722 2313  
Email: info@gatewayhealth.org.au

### Northeast Health

35-47 Green Street, Wangaratta  
Contact: (03) 5722 5239  
Fax: (03) 5722 4382  
Email: enquiries@nhw.hume.org.au

### Warragul

**West Gippsland Healthcare Group Community Services Division**  
31-35 Gladstone Street, Warragul  
Contact: (03) 5624 3500  
Fax: (03) 5624 3555  
Email: info@wghg.conm.au

### Warrnambool

**Brophy Family and Youth Services**  
210 Timor Street, Warrnambool  
Contact: (03) 5561 8888  
Fax: (03) 5561 8816  
Email: admin@brophy.org.au

### Warrnambool Community Health

Koroit Street, Warrnambool  
Contact: (03) 5563 4000  
Fax: (03) 5563 1669

### Wendouree

**Ballarat Community Health Centre – Needle and Syringe Program**  
10 Learmonth Road, Wendouree  
Contact: (03) 5338 4500  
Fax: (03) 5339 3044  
Email: info@bchc.org.au

### Wodonga

**Gateway Community Health, Wodonga**  
155 High Street, Wodonga  
Contact: (02) 6022 8888  
Fax: (02) 6024 5792  
Email: info@gatewayhealth.org.au

### Wonthaggi

**Bass Coast Health – Needle Syringe Program**  
237 Graham Street, Wonthaggi  
Contact: (03) 5671 3333  
Fax: (03) 5671 3300

### Yarra Junction

**Yarra Valley Community Health – Needle Exchange Program**  
2475 Warburton Highway, Yarra Junction  
Contact: 1300 342 255  
Fax: (03) 5962 3429

### Yarram

**Yarram and District Health Centre**  
Bakers Community Services Centre  
121 Commercial Road, Yarram  
Contact: (03) 5182 0270  
Fax: (03) 5182 0295  
Email: youth+familyservices@ydhs.com.au

### Yarrowonga

**Yarrowonga Health**  
33 Piper Street, Yarrowonga  
Contact: (03) 5743 8111  
Fax: (03) 5743 8118

### Yea

**Yea & District Memorial Hospital**  
45 Station Street, Yea  
Contact: (03) 5736 0400  
Fax: (03) 5797 2391

# Contacts

## Alcohol and Drug Programs, Primary Health Care Centres (for PWID), Regional Services

### Bayswater

**Anglicare Victoria**  
666 Mountain Highway, Bayswater  
Contact: (03) 9721 3688

### Cobaw

**Cobaw Community Health Service**  
47 High Street, Kyneton  
Contact: (03) 5421 1666  
Fax: (03) 5422 2161  
Email: admin@cobaw.org.au

### Craigieburn

**Anglicare Victoria**  
59 Craigieburn Road, Craigieburn  
Contact: (03) 9483 2401

### Fitzroy

**Youth Support + Advocacy Service (YSAS)**  
Level 1, 131 Johnston Street, Fitzroy  
Contact: (03) 9415 8881  
Fax: (03) 9415 8882  
Email: reception@ysas.org.au  
**Turning Point Alcohol & Drug Centre**  
54-62 Gertrude Street, Fitzroy  
Contact: (03) 8413 8413  
Fax: (03) 9416 3420  
Email: info\_group@turningpoint.org.au

### Frankston

**Anglicare Victoria**  
Level 2 / 60-64 Wells Street, Frankston  
Contact: (03) 9781 6700  
**Frankston Integrated Health Centre**  
12-32 Hastings Road, Frankston  
Contact: (03) 9784 8100  
Fax: (03) 9784 8149

### Geelong

**Barwon Health – Alcohol and Drug Services**  
40 Little Malop Street, Geelong  
Contact: (03) 5273 4000  
Fax: (03) 5273 4044

### Lucas

**Ballarat Community Health Centre – Mobile Drug Support Worker**  
12 Lilburne Street, Lucas  
Contact: (03) 5338 4500  
Fax: (03) 5332 6617  
Email: info@bchc.org.au

### Melbourne

**Druginfo**  
Level 12, 607 Bourke Street, Melbourne  
Contact: 1300 85 85 84  
Fax: (03) 8672 5983

### Mildura

**Drug Treatment Services**  
137 Thirteenth Street, Mildura  
Contact: (03) 5021 7694  
Fax: (03) 5021 7695  
Email: schs@schs.com.au

### Portland

**Portland District Health**  
141-151 Bentinck Street, Portland  
Contact: (03) 5521 0333  
Fax: (03) 5521 8162  
Email: pdh@swarh.vic.gov.au

### Preston

**Anglicare Victoria**  
42 Mary Street, Preston  
Contact: (03) 8470 9999

### Richmond

**Drug Safety Program**  
23 Lennox Street, Richmond  
Contact: (03) 9418 9800  
Fax: (03) 9428 2269

### Werribee

**Anglicare Victoria**  
2 Market Road, Werribee  
Contact: (03) 9731 2500

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## Primary Health Care Centres (for PWID)

### Melbourne

**Living Room, Youth Projects**  
(Hepatitis programs – Thursdays every fortnight)  
7 – 9 Hosier Lane, Melbourne  
Contact: (03) 9662 4488  
Fax: (03) 9662 4400  
Email: living@youthprojects.org.au

### Mornington

**The Bays Hospital**  
Vale Street, Mornington  
Contact: (03) 5975 2009  
Fax: (03) 5975 2373

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## Regional Services

These contacts are able to provide information about local viral hepatitis related services as well as active support groups.

### Bendigo

**Bendigo Health**  
Lucan Street, Bendigo  
Contact: (03) 5454 6000  
Fax: (03) 5454 8419

### Eaglehawk

**Eaglehawk Community House**  
19 Bright Street, Eaglehawk

### Geelong

**Barwon Mental Health, Drug and Alcohol Services**  
40 Little Malop Street, Geelong  
Contact: (03) 4215 8792  
Fax: (03) 4215 8793  
**Jigsaw Youth Health Service**  
Yarra Street, Geelong  
Contact: 1300 094 187  
Fax: (03) 4215 8298

### Healesville

**Yarra Valley Community Health Service**  
(Once per month clinic- hepatitis clinic)  
Contact: 1300 130 381  
Fax: (03) 5962 3429

### Lucas

**Ballarat Community Health**  
12 Lilburn Street, Lucas  
Telephone: (03) 5338 4500  
Fax: (03) 5338 0520  
Email: info@bchc.org.au

### Mildura

**Sunraysia Community Health Centre**  
137 Thirteenth Street, Mildura  
Contact: (03) 5022 5444  
Fax: (03) 5022 5445  
Email: schs@schs.com.au

### Mornington

**The Bays Hospital**  
Vale Street, Mornington  
Contact: (03) 5975 2009  
Fax: (03) 5975 2373

### Morwell

**Moe Community Health Centre**  
81-87 Buckley Street, Morwell  
Contact: 1800 242 696  
Fax: (03) 5136 5450  
Email: info@lchs.com.au

### Portland

**Glenelg Southern Grampians (Drug Treatment Service)**  
Bentinck Street, Portland  
Contact: (03) 5521 0350  
Fax: (03) 5521 0625  
Email: pdhspecialistcentre@swarh.vic.gov.au

**Dhauwurd-Wurrung Elderly and Community Health Service**  
(Community Health Centre)  
18 Wellington Rd, Portland VIC 3305  
Contact: (03) 5521 7535  
Fax: (03) 55211299

### Shepparton

**Primary Care Connect**  
399 Wyndham Street, Shepparton  
Telephone: (03) 5823 3200  
Fax: (03) 5823 3299

### Tatura

**Tatura Medical Centre**  
4 Thomson Street, Tatura  
Telephone: (03) 5824 1244  
Fax: (03) 5824 2551

### Torquay

**Surf Coast Health Service - Barwon Health**  
100 Surfcoast Hwy, Torquay  
Telephone: (03) 4215 7850  
Fax: (03) 4215 7889

# Contacts

## Related Health Services, Sexual Health, and Rural Services

### Traralgon

**Latrobe Regional Hospital**  
Princess Highway, Traralgon  
Contact: (03) 5173 8000  
Fax: (03) 5173 8444

### Wangaratta

**Gateway Health**  
45-47 Mackay Street, Wangaratta  
Telephone: (03) 5723 2000  
Fax: (03) 5722 2313  
Email: info@gatewayhealth.org.au

### Warragul

**West Gippsland Hospital**  
Landsborough Street, Warragul  
Contact: (03) 5623 0611  
Fax: (03) 5622 6403  
Email: info@wghg.com.au

### Warnambool

**Western Region Alcohol and Drug Centre (WRAD)**  
172 Merri Street Warnambool  
1300 009 723  
Fax: (03) 5564 5700  
Email: wrad@wrad.org.au

### Wendouree

**Ballarat Oncology and Haematology Services**  
1117 Howitt Street, Wendouree  
Contact: (03) 5339 8000  
Fax: (03) 5339 8111

### Wodonga

**Gateway Health**  
155 High Street, Wodonga  
Contact: (02) 6022 8888  
Fax: (02) 6024 5792  
Email: info@gatewayhealth.org.au

### Carlton

**Victorian Equal Opportunity and Human Rights Commission**  
(Information on state and federal equal opportunity laws and programs)  
Level 3, 204 Lygon Street, Carlton  
Telephone 1300 891 848  
Fax: 1300 891 858  
Email: information@veohrc.vic.gov.au  
Web: www.humanrightscommission.vic.gov.au

### Hampton East

**Haemophilia Foundation Victoria**  
13 Keith Street, Hampton East, VIC 3188  
Contact: (03) 9555 7595  
Fax: (03) 9555 7375  
Email: info@hfv.org.au

### Prahran

**Alfred – HIV:Hepatitis:STI Education and Resource Centre**  
(Statewide resource centre on HIV/AIDS, Hepatitis and Sexually Transmissible Infections)  
8 Moubay Street, Prahran  
Telephone: (03) 9076 6993  
Fax: (03) 9076 5294  
Email: erc@alfred.org.au  
Web: www.alfredhealth.org.au

### Melbourne

**Health Services Commissioner**  
26th Floor, 570 Bourke Street, Melbourne  
Free call: 1300 582 113  
Fax: (03) 9032 3111  
Email: hsc@dhhs.vic.gov.au

**Cancer Council Victoria – Living with Cancer Education Program**  
615 St. Kilda Road, Melbourne  
Contact: 13 11 20  
Fax: (03) 9514 6800  
Email: enquiries@cancervic.org.au

### Southbank

**Living Positive Victoria**  
Suite 1 / 111 Coventry Street, Southbank  
Contact: (03) 9863 8733  
Email: info@livingpositivevictoria@org.au

## Sexual Health

### Box Hill

**Family Planning Victoria**  
901 Whitehorse Road, Box Hill  
Contact: (03) 9257 0100  
Fax: (03) 9257 0112  
Email: fpv@fpv.org.au

### Carlton

**Melbourne Sexual Health Centre**  
580 Swanston Street, Carlton  
Contact: (03) 9341 6200  
Free call: 1800 032 017  
Web: www.mshc.org.au

### Melbourne

**Red Aware**  
Level 2 South Tower  
485 La Trobe Street, Melbourne  
Contact: (03) 9670 6171  
Email: resources@yeah.org.au

### Era Health

563 Bourke Street, Melbourne  
Contact: (03) 9944 6200  
Fax: (03) 9944 6290  
Email: info@erahealth.com.au

### Richmond

**Multicultural Health and Support Services**  
(HIV, hepatitis C and sexually transmissible infections)  
23 Lennox Street, Richmond.  
Telephone: (03) 9418 9929  
Fax: (03) 9421 4662  
Email: enquiries@ceh.org.au  
Go to: www.ceh.org.au/mhss.aspx

### Southbank

**Straight Arrow**  
Suite 1, 111 Coventry Street, Southbank  
Contact: (03) 9863 9414  
Fax: (03) 9863 9421  
Email: information@straightarrows.org.au

### South Yarra

**Victorian AIDS Council**  
6 Claremont Street, South Yarra  
Contact: (03) 9865 6700  
Fax: (03) 9826 2700  
Email: enquiries@vac.org.au

### St. Kilda

**Royal District Nursing Services (RDNS)**  
31 Alma Road, St. Kilda  
Contact: 1300 33 44 55

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## Rural Services

### Geelong

**Barwon Health – BRASH Clinic**  
Outpatients Annexe, 66 Bellerine Street, Geelong  
Contact: (03) 4215 0000  
Fax: (03) 4215 1378

### Portland

**Portland District Health**  
Bentinck Street, Portland  
Contact: (03) 5521 0333  
Fax: (03) 5521 0388

### Warrnambool

**Warrnambool Base Hospital**  
Ryot Street, Warrnambool  
Contact: (03) 5563 1666  
Fax: (03) 5563 1660

# Hepatitis Infoline

Call the Hepatitis Infoline to talk about:

**Information:** We can answer questions and mail information to you.

**Support:** We can provide support for a range of issues and concerns.

**Referral:** We can refer you to other organisations and services.

The Hepatitis Infoline is a free and confidential service for all Victorians.

## Hours

Monday to Friday 9.00am – 5.00pm



### English

Hepatitis Information Line. If you need an interpreter, please first call the Translating and Interpreting Service on 131 450.

### Vietnamese

Đường dây Hướng dẫn Bệnh Viêm Gan. Nếu cần thông dịch viên, trước tiên xin quý vị vui lòng gọi Sở Thông ngôn và Phiên dịch số 131 450.

### Farsi

خط اطلاعات هپاتیت. اگر نیاز به مترجم حضوری دارید، لطفاً با مرکز خدمات ترجمه کتبی و حضوری با شماره 131 450 تماس بگیرید.

### Amharic

የወጥ ስጦታ መረጃ ማቅረቢያ መስመር። አስተርጓሚ ካስፈለግን፤ አባክዎ መጽሐፍ ለትርጉምና አስተርጓሚ አገልግሎት በስልክ 131 450 አድርገው ይደውሉ።

### Arabic

خط المعلومات عن التهاب الكبد. إذا كنت بحاجة لخدمات مترجم، الرجاء الاتصال أولاً بخدمة الترجمة الفورية والتحريرية على الرقم 131 450.

### Chinese

肝炎信息专线。如需传译员协助，请先致电翻译服务处电话131 450。

### Khmer

ខ្សែទូរស័ព្ទផ្តល់ព័ត៌មានអំពីជំងឺរលាកថ្លើម។ ប្រសិនបើលោកអ្នកត្រូវការអ្នកបកប្រែភាសាជាដំបូង សូមទូរស័ព្ទទៅកិច្ចប្រជុំបកប្រែភាសាសរសេរ និងនិយាយ លេខ 131 450។

# hepatitisinfoline

1800 703 003

## Your donations make a difference!

Your donations help us to provide information, services, advocacy, resources and support for people affected by viral hepatitis, health professionals and members of the general public.

All donations of \$2 or more are tax deductible.

If you do not receive your receipt promptly, then please call Hepatitis Victoria on 03 9380 4644, or email: [admin@hepvic.org.au](mailto:admin@hepvic.org.au)

I would like to donate the following amount:

\$20    \$50    \$100   \$\_\_\_\_\_ (Your choice)

I have enclosed my cheque/money order/cash or

Please debit my credit card for \$\_\_\_\_\_

Type of card: Visa/MasterCard \_\_\_\_\_

Name on Card \_\_\_\_\_

Card number:

Expiry Date \_\_\_\_\_

Please send my receipt to:

Name \_\_\_\_\_

Address \_\_\_\_\_

Suburb/City \_\_\_\_\_

Postcode \_\_\_\_\_ State \_\_\_\_\_

Send to: Hepatitis Victoria  
Suite 5, 200 Sydney Road  
Brunswick, Victoria 3056