

Impact of COVID-19 restrictions on hepatitis C testing at primary care and community health services in Victoria, Australia

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on behalf of ACCESS



Background and aim

- Reaching national HCV elimination targets will require sustained high rates of HCV testing among people who inject drugs in Australia(Scott et al. 2020 *MJA*)
- State-wide COVID-19 lockdowns in Victoria may impact clinical engagement and HCV testing, hindering progress toward elimination
- We used surveillance data from Victorian primary care and community health clinics offering services to PWID to explore the impact of COVID-19 lockdowns on HCV testing



Data extracted from
11 services
in Victoria

Methods



1st January 2019 –
25th May 2021*

*Updated from abstract

Outcomes

Weekly number of:

1. RNA tests
2. Antibody tests

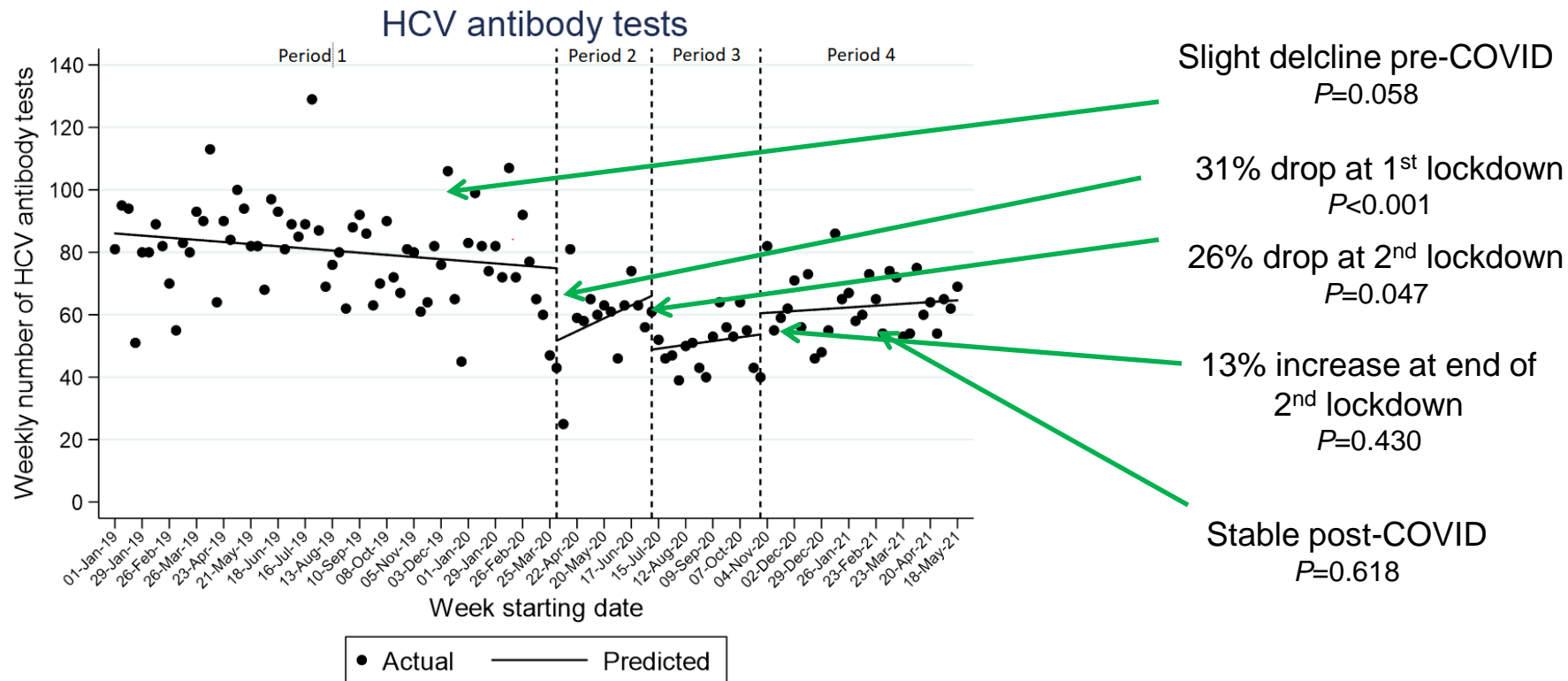


Interrupted time-series analysis

Pre-lockdown Jan 2019 – Mar 2020	1st Lockdown (+6 weeks) April 2020 – July 2020	2nd Lockdown July 2020 – October 2021	Post-lockdowns November 2021 – May 2022
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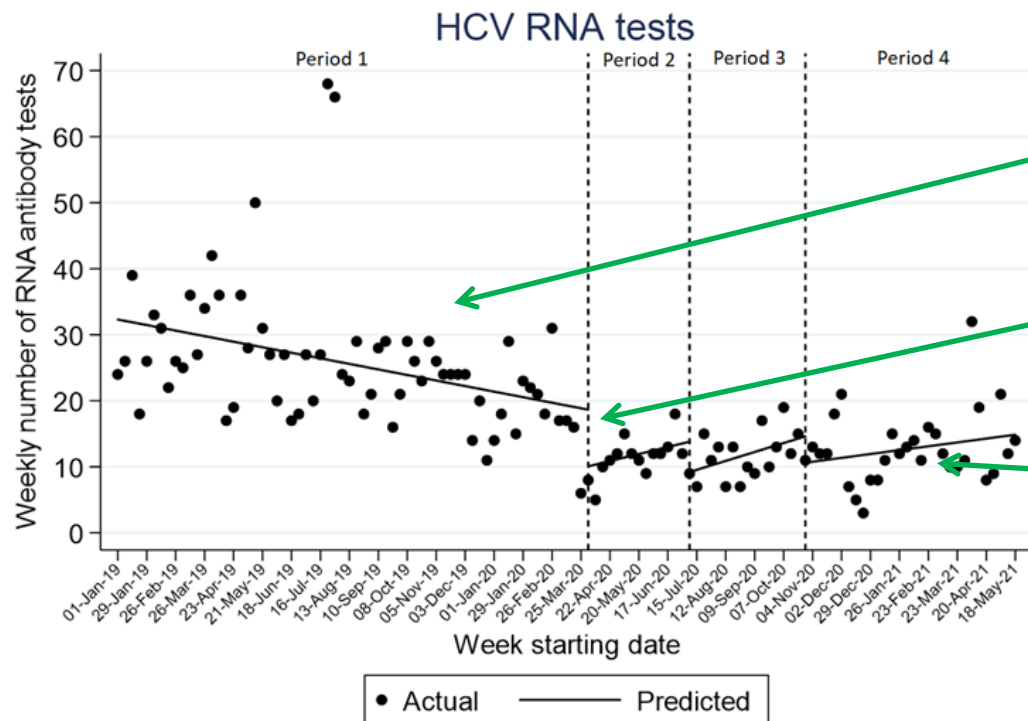
Results

8,748 antibody tests



Results

2,403 RNA tests



Declining trend pre-COVID

-0.21/week

$P=0.003$

46% drop
at 1st lockdown

$P=0.115$

Slight increasing trend
post-COVID

+0.15/week

$P=0.494$

Summary

- Hepatitis C testing significantly dropped at the start of COVID-19 lockdowns
- Testing was slow to recover post-lockdowns, and did not return to pre-COVID levels by the end of May 2021
- Cumulative number of missed testing opportunities may prolong efforts to find and diagnose the remaining populations of people living with undiagnosed hepatitis C
- Surveillance data will play an important role in monitoring the impact of COVID-19 on reaching HCV elimination targets, and can guide strategies to promote a return to service engagement

Acknowledgements

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- ACCESS advisory committee
- Co-authors
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- People living with hepatitis C providing data



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