

The hepatitis C care cascade for Aboriginal Community Controlled Health Organisations

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Background:

Aboriginal and Torres Strait Islander people are recognised as a priority population in Australia, especially in working toward elimination of hepatitis C virus (HCV) by 2030. The cascade of care for HCV describes population-level engagement at each stage of care, allowing for the evaluation and monitoring of health care delivery.

Methods:

This study analysed deidentified clinical data collected from 35 Aboriginal Community Controlled Health Organisations (ACCHOs) in Australia, as part of the ATLAS Indigenous Primary Care Surveillance and Research Network to identify and address limitations in the HCV care cascade for Aboriginal and Torres Strait Islander people for the period 2016-2023.

Results:

Among 156,283 clients, 32,514 had HCV antibody (Ab) tests administered, of which 3.9% (1,264) had a reactive Ab test. Of these clients, 67% (n=855) were tested for RNA viral load, and of these, 54% (n=460) had RNA detected. Within 90 days of a positive RNA result, 240 (52.2%) clients re-attended the service, and 98 (40.8%) of these clients had evidence of direct acting antivirals (DAAs) prescribed; 142 (59.2%) did not. From 12 weeks to one year after DAA prescription, 40 clients (40.8%) had follow-up RNA tests, and 35 (87.5%) showed no detectable viral load. Gender, age, and remoteness had no significant effect on the prescription of DAAs.

Conclusion:

Findings of the study will inform HCV elimination efforts in Australia by identifying gaps in service delivery and opportunities for quality improvement initiatives. The data will also add to the evidence base on HCV testing and treatment nationally. Results can be translated to other primary care services and inform targeted strategies to enhance treatment uptake and reach elimination targets among Aboriginal and Torres Strait Islander people who are recognised as a priority population.

Disclosure of Interest Statement:

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Publication approval of research findings has been given by the ATLAS Clinical Hub Reference Group, as the data custodian on behalf of the sovereign owners of the data

contributing to this study. The Clinical Hub Reference Group provides Indigenous governance and oversight of all data collected through the ATLAS network.