

A national program to scale-up point-of-care testing and treatment for hepatitis C infection in Australia, 2022-2024

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Background: Fingerstick point-of-care HCV RNA testing enables diagnosis and treatment in a single-visit, increases testing acceptability, and reduces loss to follow-up. We evaluated RNA prevalence and treatment uptake (and associated factors) in a national program to scale-up point-of-care HCV testing.

Methods: The National HCV Point-of-Care Testing Program is evaluating scale-up of point-of-care HCV testing through an observational study at 94 sites in all states/territories in Australia. Point-of-care testing is provided for people at HCV risk or attending a service providing care for people at HCV risk. Factors associated with HCV treatment uptake were identified through logistic regression analyses. The proportion of people receiving HCV treatment from January 2022-March 2024 among all people treated in Australia was assessed.

Results: From January 2022-March 2024, 94 sites (community, n=60; prison, n=34, 314 locations) provided testing (291 operators trained). 20,938 HCV point-of-care tests were performed (antibody, n=5,116; RNA, n=15,822), with 8,173 people tested in community and 9,863 in prison. Among those receiving RNA testing, 2,399 (13%) have current HCV infection (community, 10%; prison, 16%). Among the evaluable population (reached 12 weeks post-testing), HCV treatment uptake is 78% (1,660/2,123), including 53% (351/660) in community and 89% (1,309/1,463) in prison. Among people with current HCV in the community, history of opioid agonist treatment was associated with greater odds of HCV treatment [aOR, 2.66, 95% CI: 1.24, 5.70]. People with >daily injecting drug use in the last 30 days (aOR 0.38, 95% CI: 0.20, 0.70) and people tested at a needle/syringe program [compared to drug treatment services; aOR 0.38 (95% CI: 0.21, 0.71) had a lower odds of HCV treatment]. Among HCV treatments between January 2022-March 2023 in Australia, 9% (835 of 9294) of treatments were provided through the program.

Conclusion: Onsite point-of-care HCV testing has led to high treatment uptake, particularly in prison settings in Australia.

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