

HEPATITIS C VIRUS SELF-TESTING: AN EFFECTIVE APPROACH TO REACH UNREACHED PEOPLE WHO INJECT DRUGS FOR HCV TESTING AND TREATMENT IN VIETNAM.

Authors:

Vu NB¹, Green K¹, Tran HM², Nguyen MH¹, Do TK¹, Tran THL¹, Tran KA¹, Le TG², Pham VC¹, Granger K¹, Nguyen TLA¹, and Pham KL²

¹PATH, Hanoi, Vietnam, ²CCIHP, Hanoi, Vietnam

Background:

Hepatitis C virus self-testing (HCVST) is an innovative approach to accelerate progress towards HCV elimination goals. We conducted a cross-sectional observational study to assess the acceptability and effectiveness of HCVST compared to routine HCV testing among key populations (KP) including people who inject drugs (PWID) in Hanoi and Ho Chi Minh City, Vietnam.

Description of model of care/intervention/program:

From September 2023 to January 2024, we engaged eight community-based organizations (CBOs), six anti-retroviral therapy and methadone maintenance treatment (MMT) public clinics, and four KP-led private clinics in implementing community-based, facility-based, online, and secondary distribution HCVST. Clients were offered the choice of an oral fluid-based HCVST, or rapid HCV testing provided by CBOs and clinics (CBO/clinic PL-HCVT). Individuals with a reactive result were referred to designated public and private clinics for HCV confirmatory testing and treatment initiation. HCVST effectiveness was measured by the proportion of first-time testers, HCV positivity and treatment initiation rates.

Effectiveness:

Among 1,165 PWID recruited, 693 opted for HCVST and 472 opted for PL-HCVT. The proportion of first-time testers was significantly higher in secondary distribution and community-based HCVST compared to CBO PL-HCVT, online HCVST, clinic PL-HCVT, and facility-based HCVST (93.3% and 87.1% vs. 82.7%, 50%, 41.9% and 35.7%, respectively). Overall, HCV seropositivity rate was lower in HCVST than in PL-HCVT (13.6% vs. 29.4%), however, it was higher in facility-based and community-based HCVST compared to secondary distribution and online HCVST (28.1% and 20.4% vs. 5.7% and 0%, respectively). Of 250 HCV sero-positive individuals detected, 123 were from HCVST, of which 91% received confirmatory testing, and 100% of those eligible initiated HCV treatment.

Conclusion and next steps:

HCVST is an additional effective approach to increase uptake of HCV testing and treatment among PWID. Community-based HCVST is effective in reaching unreachable and undiagnosed PWID, while secondary distribution and facility-based HCVST are effective in reaching first-time testers or finding HCV positive cases, respectively.

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Disclosure of Interest Statement: I have no conflict of interest to disclose.

The conference collaborators recognise the considerable contribution that industry partners make to professional and research activities. We also recognise the need for transparency of disclosure of potential conflicts of interest by acknowledging these relationships in publications and presentations.