

# **OPT-OUT INFECTIOUS DISEASE SCREENING WITHIN AN INPATIENT SUBSTANCE USE TREATMENT PROGRAM: OPPORTUNITIES FOR INFECTION PREVENTION AND EXPEDITED CARE**

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## **Background:**

People with substance use disorders (SUD) are at higher risk for infectious diseases (ID) yet face many barriers to accessing care. Integration of testing, counseling, and treatment for ID within SUD recovery programs has the potential to increase uptake of preventative and curative treatment.

## **Description of Model of Care:**

We implemented an opt-out ID screening intervention within an 18-bed inpatient detoxification and recovery program in Philadelphia between September 2022 – June 2023. Uptake of screening and acceptance of subsequent treatment and preventative care were evaluated. A nurse met with each patient to offer screening for HIV, hepatitis A (HAV), hepatitis B (HBV), and hepatitis C (HCV) if no screening was documented within the prior three months. Results were reviewed with patients. Vaccinations (HAV and/or HBV), pre-exposure prophylaxis (PrEP) for HIV, and/or treatment for HCV or HIV were offered as recommended by an ID physician.

## **Effectiveness:**

Among 254 patients admitted (73% male, median age 49 years, median length of stay 18 days), 207 met the nurse and 187 completed  $\geq 1$  recommended test. HAV and HBV screening were completed, or status documented, in 94% and 97% respectively. Vaccination for HAV and HBV was indicated in 81 and 85 patients and accepted by 61% and 71% of patients respectively. Among 149 patients tested for HIV, no new diagnoses were identified. Seven patients reported interest in PrEP and three initiated prior to discharge. HCV screening was completed in 181, and 19 had HCV viremia. Nine viremic patients received HCV treatment: three initiated during admission, six received first direct acting antiviral fill within 10 weeks of discharge, including two patients with prior treatment failure. Eight patients with HCV viremia were dispensed complete treatment and four returned with cure documented.

## **Conclusion:**

Opt-out screening for HIV and viral hepatitis within inpatient SUD treatment programs can facilitate delivery of prevention interventions and expedite HCV treatment.

## **Disclosure of Interest Statement:**

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