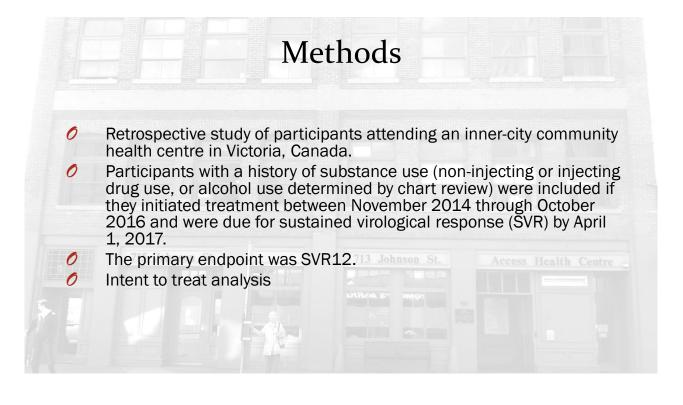


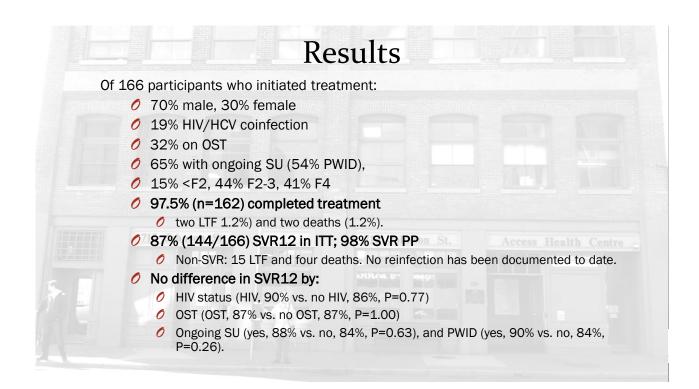


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Background

- Direct-acting antiviral (DAA) HCV therapy has been shown to be effective among people who inject drugs (PWID), but there is limited research on HCV treatment among PWID in real-world primary care settings.
- It is important to evaluate HCV treatment uptake and outcomes in primary care settings as specialist access is a significant barrier to care for many.
- Single-site, integrated substance use and mental health services reduce barriers to care for PWID.
 - The aim of this analysis was to assess the efficacy of DAA therapy for chronic HCV among people with current or prior substance use attending a community health centre.





Conclusions

- This retrospective study demonstrates that DAA treatment is effective, with no observed reinfections in a highly complex inner city cohort of people with ongoing substance use within a primary care setting.
- Our findings further demonstrate the efficacy of treating vulnerable populations within the context of primary care and provide a rationale for expanded primary care services of HCV.
- Our findings identify the need for new strategies to reduce LTF and increase ongoing engagement for follow up evaluation of re-infection and improved overall health outcomes

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