

## **THE KOMBI CLINIC – IT’S THE END OF THE ROAD FOR HEP C!**

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### **Background / Approach:**

In Australia Hepatitis C disproportionately affects the disenfranchised and most marginalised patients. While some clinicians see this patient population as the “hard to reach”, the Kombi clinic takes the alternate view that it is ‘us’ the medical fraternity that are in fact hard to access.

### **Analysis / Argument:**

There is pressing need to take the cure to the patient rather than sit in fortified offices with the well documented barriers to access. The Kombi Clinic takes two GP’s, a phlebotomist and a fibroscan nurse in a 1978 Kombi Van, to venues such as drug rehab centres and rough sleeping locations throughout South East Queensland. These venues have a higher proportion of patients with hep C that are not able to access the ‘usual’ route of care. It is a 2 visit process, the first being a doctor consultation, bloods and fibroscan and at the second visit a script is written as appropriate.

### **Outcomes / results:**

Over the past 8 months we have had 137 patients present to the Kombi clinics (average age 41yrs) of these 97 patients were HCV serology positive and 75 patients were RNA positive. We have started 52 patients on HCV treatment. 93% of the patients we saw were had a fibroscan score below 12.5kPa the accepted cut off for cirrhosis. The HCV genotypes show that 40.8% were genotype 1 with 52.2% genotype 3, Genotype 2,4 & 6 making up the remaining 7%.

### **Conclusions / Applications:**

The Kombi Clinic has found that by breaking down the traditional barriers to access HCV treatment (cost, complexity, distance, stigma etc) we have had great success getting patients into the clinic and on to treatment that would of otherwise had no opportunity for a cure.

### **Disclosure of Interest**

- Hepatitis Queensland received funding from MSD to support this project
- The Kombi Clinic Project was granted a research fellowship from Gilead