

COMMUNITY LED ELIMINATION APPROACH FOR REPLICATION: A HEPATITIS-C INTERVENTION AMONG PEOPLE WHO INJECT DRUGS FROM NORTH-EAST INDIA

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Background:

People who inject drugs (PWID) bear a high burden of Hepatitis C virus (HCV) infection due to unsafe injecting practices. Further, uptake of HCV confirmatory testing, treatment compliance, and attaining viral suppression remains low due to limited awareness, barriers to access, stigma, and poor health-seeking behavior. This decentralized community-led intervention, supported by Unitaid, aimed to strengthen HCV cascade of services.

Approach:

In Dimapur, Nagaland, PATH coordinated with the State AIDS Control Society, Viral Hepatitis Control Program, and District Hospital to capacitate the Community Awareness and Development (CAD) Foundation to strengthen HCV services at an HIV prevention site for PWID. Peers were trained on HCV screening, demand generation, operational linkages for HCV testing and treatment, periodical meetings, and tracking HCV care cascade indicators.

Analysis:

Between July 2025–January 2026, 1,058 PWID were registered at the intervention site and 91% (n=962, M-960: F-2) were screened for HCV for the first time. The mean age of screened male PWID was 31.7 years (SD ±8.91) and female PWID was 32 years (S.D± 1). Among those screened for the first time, 7% (70/962) were HCV reactive and all were confirmed Rib-nucleic Acid (RNA) positive. Among the RNA-positive, 68% (46/70) were eligible for a 12-week DAA treatment, and 96% (44/46) were initiated on treatment within 3 days. 100% (36/36) completed the treatment within the stipulated 12-week period, and the remaining nine were yet to complete the 12-week period. Of 17 people eligible for sustained virological response-12, 94% (16) achieved viral suppression.

Conclusion:

A decentralized community-led intervention, leveraging the established HIV prevention program, coupled with effective operational linkages and an efficient data capturing system, improves uptake of HCV testing and treatment compliance. The model could be replicated among PWID accessing HIV prevention programs and accelerate progress towards eliminating HCV as a public health threat.

Disclosure of Interest Statement: *See example below:*

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