

OUTCOMES OF TREATMENT FOR HEPATITIS C VIRUS INFECTION IN THE PRISON SETTING

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Background:

The prison setting provides opportunity to engage and treat high-risk individuals to reduce HCV prevalence and incidence. There has been little data to support the efficacy of prison-based treatment programs using DAAs. A nurse-led hepatitis program has been implemented in 14 prisons in Victoria to assess and treat prisoners living with HCV. We have evaluated the efficacy of antiviral therapy delivered in the prison system using this model.

Methods:

All prisoners are offered screening for viral hepatitis on prison entry. Seropositive prisoners are referred for protocol-driven face-to-face (F2F) assessment by a Clinical Nurse Consultant (CNC) at their local prison. CNCs conduct clinical assessments and liver stiffness measurement using transient elastography (FibroScan). Patients can be triaged for consultation by supervising hepatologists. Eligible prisoners must be able to complete treatment within expected sentence duration. DAA therapies are prescribed by supervising hepatologists based on the protocol-driven assessment. We report the results of the first 17 months of the program.

Results:

1180 prisoners have been assessed, 633 prisoners had treatment commenced. 87% were male, 13% were female. Genotype 3a HCV = 46%, Genotype 1a HCV = 46%. Greater than 90% report a history of injecting drug use and more than 50% report intravenous drug use while incarcerated. 37% had advanced fibrosis, 23% were cirrhotic. 46% have been prescribed Sofosbuvir/Daclastavir, 46% Sofosbuvir/Ledipasvir, 6% other. Per-protocol analysis SVR12 cure rate of 95%, intention-to-treat analysis 68%. Results of all prisoners completing treatment before 1st August 2017 will be presented at conference.

Conclusion:

Treatment for HCV can be delivered safely, effectively and in high numbers in the prison setting using an innovative nurse-led model of care. The prison setting provides an excellent opportunity to engage and treat highrisk individuals, and should be part of public health platforms supporting elimination of HCV.