HEPC MOBILE AND VIRTUAL CLINIC: HCV INFECTION TESTING AND TREATMENT WITH THE PRIMARY CARE NETWORK IN CANTON VAUD, SWITZERLAND

Authors:

<u>Castro E</u>¹⁻², Nursing team from Point d'Eau Lausanne³ and Healthcare team from Champ-Fleuri Foundation⁴.

- ¹ Private practice and HepC Virtual Clinic, Lausanne, Switzerland
- ² Levant Foundation, Switzerland
- ³ Point d'Eau Lausanne, Switzerland
- ⁴Champ-Fleuri Foundation, Glion, Switzerland

Background:

In Switzerland DAA treatment is reimbursed by universal healthcare insurance and can be prescribed by all registered medical doctors. This independently of public or private source of healthcare provider. Nevertheless, access to undiagnosed and untreated vulnerable groups with HCV infection remains challenging. The Hepatitis C Virtual Clinic (HCVC) initiative was launched in 2019 to support GPs and healthcare workers to diagnose, follow-up and/or prescribe DAA treatment for people living with chronic hepatitis C infection.

Description of model of care/intervention/program:

Our private practice and the Levant Foundation are home to the HCVC initiative. In 2023 we added the mobile offer to perform onsite screening visits at settings caring for people at risk for HCV infection. Onsite visits are designed and performed together with nursing teams according to each setting's needs. The reference visit algorithm is shown in figure 1a, followed by webinar and telemedicine appointments.

Effectiveness:

The ongoing HCV care cascade, is summarized in figure 1b.

Concretely, since September 2023 we screened 49 people, age = 49 ± 8 years old, women = 16 (32%), HCV first test ever = 15 (30%), follow-up of people for hepatitis C reinfection = 22 (44%), GPs referrals = 4 (8%). Reflex HCV RNA was detected in 23% (7/30) individuals, 1 reinfection 4.5% (1/22), 57% (4/7) of new chronic HCV infections were found in women and two of them as late presenters (F3-4 liver fibrosis score). DAA was started in 4 people and SVR+3 was recorded in 2 cases. Two DAA are ongoing and 4 are on the pipeline.

Conclusion and next steps:

Onsite work with nursing teams and other healthcare providers enhances success of HCV infection screening, readiness for treatment and DAA achievement in key populations. Regular visits are planned with current partners as well as in new settings from the network.

Disclosure of Interest Statement:

The HCVC is co-sponsored by AbbVie, Gilead and the Loterie Romande with the promotion of the Levant Foundation.

Figure 1a

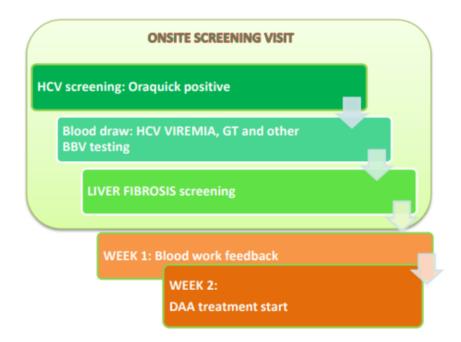


Figure 1b

