# A Community-based Approach to Viral Hepatitis in Central Appalachia

Jane Crowe, MSSW
Sarah Adams, MPH
Jeremy Garner, BS
Knox County Health Department



#### **Disclosures**

- Jane Crowe is Hepatitis C (HCV) Program Manager at Knox County Health Department which has received research grants from Gilead Sciences, Inc.
- Knox County Health Department is a metropolitan public health department located in the southeastern United States that sees over 60,000 patient visits annually.

## Background/aims

- Knox County is vulnerable to rapid dissemination of HIV/HCV due to injection drug use.
- Prior to initiation of the project, universal HCV screening was nonexistent and no treatment resources were available for persons without health insurance.
- Aims: to quantify HCV prevalence and risk factors and to increase HCV education, prevention, harm reduction, and linkage to care

#### **Methods**

- Universal, opt-out HCV screening was provided for patients age
   14 and over at five clinics
- Risk factors were assessed by self-report at time of testing, including history of intravenous drug use (IVDU) and incarceration
- Descriptive data was used as a tool for building a communitywide response to HCV

#### Results

- Between June 1, 2016 and March 31, 2019, 18,280 unique patients received an HCV test; 13.6% were antibody positive (Ab+) and 9.5% showed current infection (Ab+/RNA+).
- IVDU showed the highest HCV exposure rate with 70% of People Who Inject Drugs (PWIDs) testing Ab+, followed by intranasal drug use (38%), incarceration (32%), and homelessness (31%).
- 75% of RNA+ individuals lacked health insurance.

## Conclusions/implications

- Baseline data demonstrated need for outreach in non-clinical settings, increased stakeholder engagement and justified funding for HCV treatment resources.
- 70% of RNA+ persons received education, harm reduction, and linkage to care services in clinical and outreach settings.
- The number of providers treating HCV for uninsured persons increased from 0 to 30 between 2016-2019.
- What's next? Increased funding to expand HCV treatment and harm reduction among PWIDs. Meaningful engagement of PWIDs in program and policy development.

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