

## PEER-ASSISTED TELEMEDICINE FOR HEPATITIS C AND SYPHILIS (PATHS)

### Authors:

Spencer H<sup>1</sup>, Cooper, J<sup>1</sup>, Jones, K<sup>1</sup>, Gailey, T<sup>1</sup>, Leichtling, G<sup>2</sup>, Leahy J<sup>3</sup>, Cook, R<sup>1</sup>, Seaman, A<sup>1,4</sup>, Korthuis PT<sup>1</sup>

<sup>1</sup>Department of Medicine, Oregon Health & Science University, <sup>2</sup>Comagine Health, Portland, Oregon, USA; Portland, Oregon, USA, <sup>3</sup>Oregon Health Authority, Behavioral Health Division, Portland, Oregon, USA, <sup>4</sup>Central City Concern, Portland, Oregon, USA

### Background:

In the United States, rural people who use drugs (PWUD) face heightened barriers to hepatitis C virus (HCV) treatment. We recently completed a pragmatic randomized trial of peer-assisted telemedicine HCV treatment in rural Oregon which demonstrated improved rates of HCV cure compared to peer-facilitated usual care. Peer-Assisted Telemedicine for Hepatitis C and Syphilis (PATHS) has broadly implemented this intervention to widen the reach of services throughout the state of Oregon.

### Description of model of care/intervention/program:

The core PATHS team, hosted at an academic medical center, consists of 0.5 full-time equivalency provider time and two staff members. Both staff members have lived experience of substance use. PATHS partners with community-based organizations in rural areas that employ peer recovery support specialists (“peers”), funded through a state Behavioral Health Division program (PRIME+). Peers perform rapid HCV screening and facilitate phlebotomy pre-treatment evaluation, telemedicine visits, medication adherence, and provide harm reduction services. Key collaborators include a nonprofit healthcare consulting firm, local health departments, and the state Behavioral Health Division.

### Effectiveness:

From October 2022 to March 2024, PATHS diagnosed 117 cases of HCV in 16 of Oregon’s 36 counties. Of those diagnosed with HCV, 98 (84%) were linked to a telemedicine visit and 80 (68%) initiated HCV treatment. Of those who initiated treatment, 59 (74%) have completed treatment and 21 (26%) or are still on therapy. Of 27 patients completing treatment and ≥12 weeks follow-up, 100% demonstrated sustained virologic response at 12 weeks.

### Conclusion and next steps:

PATHS implements peer-assisted telemedicine for hepatitis C with real-world effectiveness similar to that seen in a randomized trial. Next steps include low-barrier linkage to telemedicine-based medications for opioid use disorder, dried blood spot testing to replace phlebotomy in the pre-treatment evaluation, and scaling beyond Oregon.

### Disclosure of Interest Statement:

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