

HARM REDUCTION AS A BRIDGE TO HEPATITIS C TREATMENT AND CURE: A HOLISTIC APPROACH

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Background:

For people who actively inject drugs, linkage and retention in HCV medical treatment can be difficult. These individuals often face barriers including housing instability, food insecurity, lack of transportation, lack of health insurance, and stigma. This program described below provided comprehensive on-site clinical and supportive services to retain patients in care.

Description of program:

The program was implemented at Damien Center, the oldest and largest HIV/AIDS organization in Indiana. An HCV program was established within the medical clinic and a Community Health Worker was assigned to assist high acuity individuals through HCV treatment. Other support provided include on-site safe syringe program, food pantry, transportation assistance, and incentive gift cards. For 15 months, data was collected to observe how individuals moved through HCV medical treatment.

Effectiveness:

Of 67 clients that pursued HCV treatment, 20 patients cleared their HCV infection without treatment, 1 person discontinued treatment before completion. 29 patients completed their DAA treatment. At SVR12, 11 achieved a cure, three were not cured, and 12 clients were not yet due for their SVR12 lab when data was collected.

This indicates 97% of people who were prescribed DAA picked up all refills. Only 10% were unable to be retained in care to attend the final SVR12 appointment. Overall, only 13% of the 67 people who began care were lost to follow up.

Conclusion and next steps:

Holistic care systems reduce barriers and increase positive HCV treatment outcomes. This program demonstrates that patients who inject drugs can achieve a cure when health systems support their needs. This understanding is crucial for health systems in removing stigma surrounding the treatment of people with a history of IDU.

Disclosure of Interest Statement:

The authors declare that they have no competing financial or personal interests that influenced the work reported in this paper.