A Regional Prison Cleared Of Hepatitis C in Less Than 12 Months

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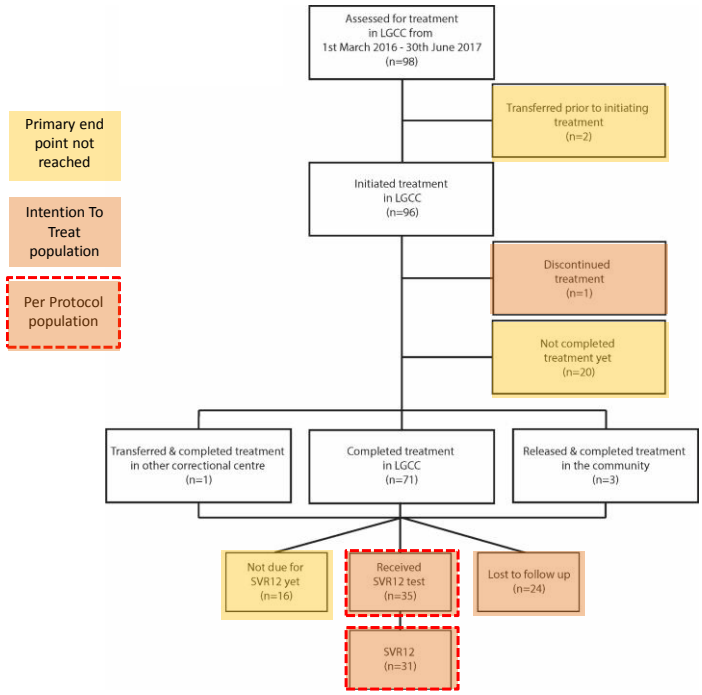
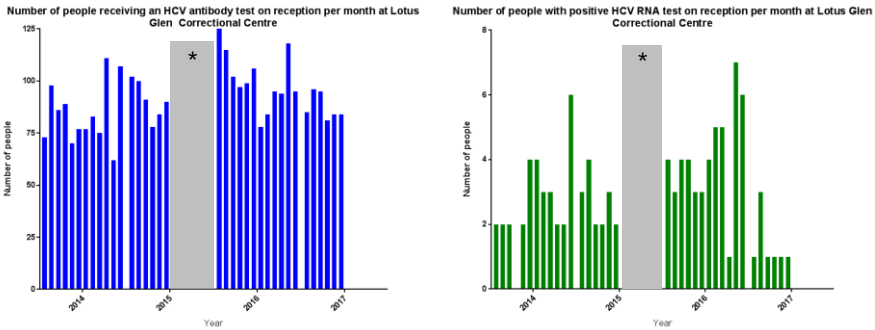
Characteristics of participants who commenced treatment for HCV infection with DAAs at Lotus Glen Correctional Centre between 1st March 2016 and 30th June 2017

Characteristic	Overall
Total n (%)	(n = 96)
Age (median years, Q2-Q3)	35 (29-40)
Cirrhosis	14 (17%)
HCV RNA level	
<400,000 IU/mL	46 (48%)
HCV Genotype	
1a	35 (37%)
1b	1 (1%)
2	1 (1%)
3a	59 (61%)
HCV Treatment history	
Naive	64 (67%)
IFN-experienced	6 (6%)
DAA-experienced	1 (1%)
HCV treatment regimen	
Sofosbuvir + Daclatasvir 12 weeks	49 (51%)
Sofosbuvir + Daclatasvir 24 weeks	10 (11%)
Sofosbuvir + Ledipasvir 8 weeks	26 (27%)
Sofosbuvir + Ledipasvir 12 weeks	6 (6%)
Sofosbuvir + Ribavirin, 12 weeks	1 (1%)
Grazoprevir + Elbasvir, 12 weeks	4 (4%)

Percentages indicate column percentages.
Abbreviations: Sustained virological response (SVR), hepatitis C virus (HCV), quartiles (Q), ribose nucleic acid (RNA), interferon (IFN).



- High numbers of inmates tested for HCV on reception at LGCC ≈ 95%



**testing was conducted Jul-Dec 2015, however data was unavailable*

- Marked reduction in point prevalence of HCV infection at Lotus Glen Correctional Centre during and after scale up of treatment with DAAs

Time point	Approximate number of inmates	HCV RNA positive			
		N#	%#	N*	%*
February 29th 2016	800	95	11.75	95	11.75
February 28th 2017	800	52	6.50	35	4.38
June 30th 2017	800	26	3.25	14	1.75

#Includes all people currently on treatment, in addition to untreated people

*Excludes people on treatment for at least 4 weeks (assumed to be virally suppressed)

Conclusions

- Sexual Health Service based prison treatment of HCV demonstrated to be highly effective
- Extremely high acceptance of DAA based therapy
- Marked reduction in viraemic prevalence over an 18 month period
- Need for long term follow up for monitoring of reinfection
- Need for ongoing screening on entry and rapid initiation of treatment
- Limitations
  - Early indicators of a Treatment as Prevention impact, but more data needed