

The Road To Hepatitis C Elimination: A Change In Care Pathway Increases Access To Hepatitis C Treatment For People On Opiate Substitution Therapy

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Background:

To achieve HCV elimination more people must have access to treatment. With direct acting antiviral (DAA) therapies, the opportunity exists to remove many of the pre-treatment investigations and review appointments previously required before treatment could safely be initiated. By removing these barriers the aim was to facilitate a greater number of people onto treatment, specifically for those receiving Opiate substitution therapies (OST).

Approach:

From August 2017 our treatment pathway was revised to reduce the assessment burden. Patients could now have a single set of liver tests and a Fib4 score calculated to assess the likely extent of liver disease. Those with no evidence of liver cirrhosis could advance to treatment prescribed by Specialist Nursing Staff, avoiding 3 further appointments for Fibroscan, liver ultrasound and a Medical Practitioners review.

Outcome:

Retrospective analysis of the data on those treated between September 2016 to March 2017 and the subsequent year, indicate an increase in treatment numbers from 92 to 164. This included an increase of over 100% in patients in receipt of OST in an outreach setting where the transmission route is known to be intravenous drug use.

Conclusion:

Individuals on opiate substitution therapy can find it challenging to progress through traditional pathways due to the complex and time consuming assessment process. Simplification of the pathway has resulted in 70% of patients being able to access immediate treatment and the numbers treated in outreach drug services significantly increased from the previous time period. This highlights the efficiency of the new pathway. Follow up SVR data on both cohorts will be available in the coming months.

Disclosure of Interest Statement:

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