DRUG TREATMENT SERVICE PROVIDER FORUM DEVELOPMENT OF HEPATITIS C MICROELIMINATION CRITERIA FOR THE PEOPLE IN STRUCTURED TREATMENT WITHIN THE DEFINED POPULATION

D Burch¹, T Kemp², E Lamond³, D Moores⁴, M Freeman⁵, M Milner⁶ on behalf of the Gilead Hepatitis C Drug and Alcohol Treatment Services Provider Forum

¹ NHS Addictions Provider Alliance / Hep C U Later; ² Change Grow Live; ³ We Are With You; ⁴Humankind; ⁵ Via; ⁶Gilead Sciences Ltd, London, UK

Background

- NHS England (NHSE) are seeking to achieve the elimination of Hepatitis C Virus (HCV) ahead of the WHO target of 2030 and as the virus primarily affects people who inject drugs it is important that there are effective testing, referral, and treatment pathways for those accessing drug treatment services (DTS).
- The HCV DTS Provider Forum was established by Gilead Sciences Ltd under the NHSE HCV Elimination Program and brings together 5 of the largest third sector providers of DTS in England alongside 14 NHS Trusts (the Hep C U Later Programme) and The Hepatitis C Trust to encourage collaboration, innovation and best practice sharing as we work towards a shared ambition of achieving HCV elimination.

Description

- In September 2020, Gilead Sciences Ltd set up The Hepatitis C Drug Treatment Services (DTS) Provider Forum as a unique collaboration between NHS England, The Hepatitis C Trust and the largest providers of DTS in England with a united approach to achieve HCV elimination in DTS
- Partnered DTS are commissioned to test service users for HCV and refer them to treatment.
- In June 2022, as a benchmark against an individual service's HCV elimination efforts, the Forum reached consensus on criteria for achieving microelimination within a DTS site. In broad terms, microelimination is the achievement of HCV elimination within a specific location or small population; for DTS, this means that there aren't many patients left with active HCV infection at the site. It is achieved by breaking down national elimination goals for individual population segments or specific settings, for which treatment and prevention interventions can be delivered more quickly and efficiently using targeted methods.
- The document in figure 1 sets out the detailed criteria for microelimination of Hep C within a DTS that have been collaboratively established through an extensive and careful review process, and by consensus agreement from the Hep C DTS Provider Forum partners.
- It is important to note that there are caveats around the criteria, and that the criteria are not intended to be a definitive definition of elimination, but to serve as aspirational targets to local and individual DTS as we work towards our shared ambition to achieve Hep C Elimination in DTS, in England and globally.

Agreed Criteria

- 100% of clients in structured treatment are offered a Hep C test
- 100% of clients who have a history of injecting have a valid Hep C test date
- 90% of clients in structured treatment, who have a history of injecting (and are deemed to be at risk), have a Hep C test date in the last 12 months and a result recorded
- 90%^c of clients in structured treatment with positive Hep C test result PCR (RNA) status have commenced treatment

^a2% tolerance is permissible.

bExcluding clients for whom HCV testing was assessed as not appropriate to offer. ^cAccountability for patient starts and reporting patient starts sits with the Operational Delivery Network. The service will commit to ensuring a robust referral mechanism and support stakeholders in seeking and implementing a local and/or national mechanism for obtaining and reporting accurate patient start data based on a patient start date defined as date of prescription.

References: 1. Drug Treatment Service (DTS) Hepatitis C Micro Elimination Criteria for the People in Structured Treatment Within the Defined Population Version 1.0, August 2022. 2. Data on file – Gilead Sciences.

Disclosure of interest statement: Drug and Alcohol Service Standards for Hepatitis C Virus (HCV) and other Blood Borne Viruses (BBVs) (England) have been developed and funded by Gilead Sciences Ltd in collaboration with representatives from Gilead-partnered DTS providers and The Hepatitis C Trust as part of the NHS England HCV **Elimination Program**

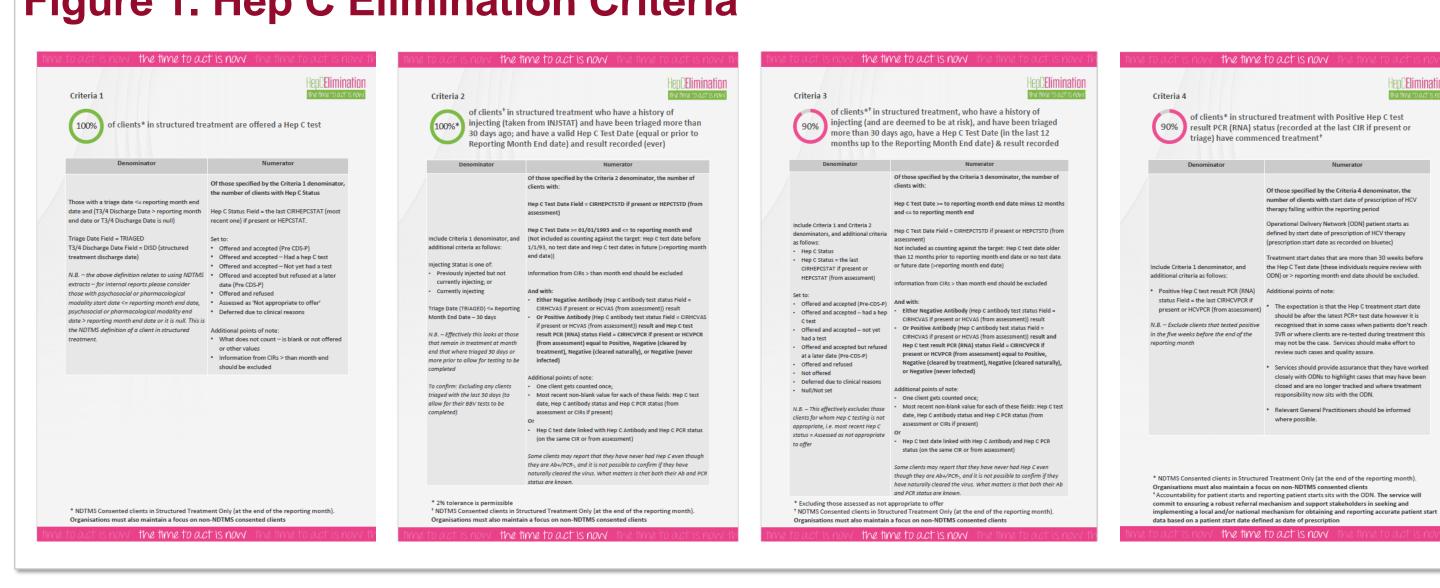
Information in this poster has been summarised from each Standard. For full details of criteria for the Standards, please

refer to the complete document.

Correspondence: Deanne Burch, Programme Lead, Hep C U Later, Staffordshire, UK Email: deanne.burch@mpft.nhs.uk

Outputs

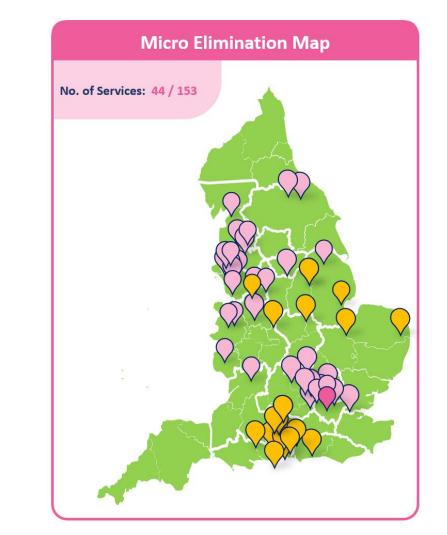
Figure 1. Hep C Elimination Criteria

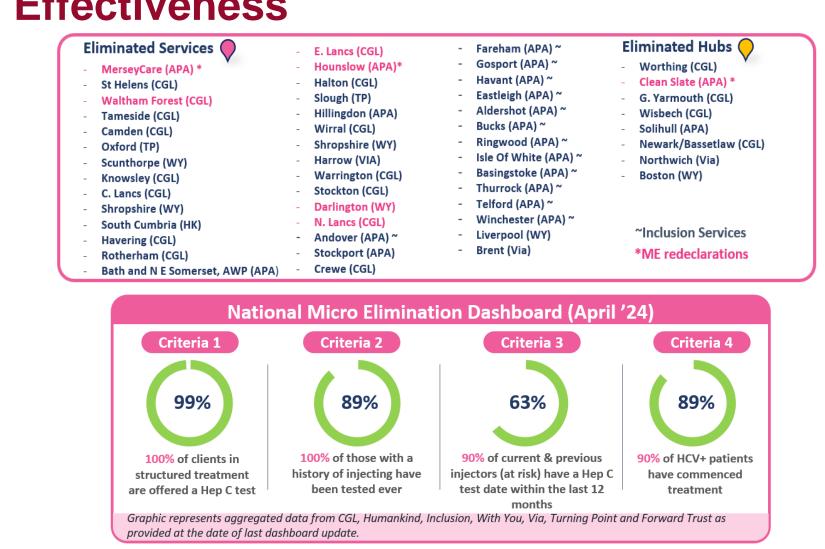


Effectiveness

- Development of agreed microelimination and supporting measures has supported HCV elimination efforts within DTS in England.
- Provider Forum DTS members have delivered over 200,000 HCV tests² since September 2019 with over 10,0000 individuals starting treatment.
- There have been 44 declared microeliminations² across Provider Forum member DTS.

Figure 1. Micro Elimination Effectiveness





Conclusion and Next Steps

Providing specific testing and treatment targets within a defined population supports HCV elimination efforts.

DTS staff have found specific targets motivational and declarations of microelimination have spurred additional services to increase effort.

These criteria stand at the time of writing however since submission a new version of criteria has been created and will be published in the near future. Iterative updates to microelimination criterion 4 have been further defined by forum member organisations.

It is recognised that there may be at-risk individuals within services that are excluded from these criteria and the Forum intend to re-evaluate the criteria to include a wider population to those defined as current and previous injecting.

Partner Logos:











