

LEAVING NO ONE BEHIND - INTEGRATION OF HCV CARE IN ANTI-TB TREATMENT FOR PEOPLE WHO USE DRUGS DURING WARTIME IN UKRAINE

Background: National data from 2021 indicates that 14% of persons tested for HCV had MDR-TB/HCV co-infection. WHO enlisted Ukraine in 12 MDR/RR-TB high-burdened countries. Since 2015, APH provided a comprehensive package of HCV services to almost 13,000 PLWH. In 2021, APH started treatment of HCV-infection for TB/HCV co-infected people, who use drugs.

Description of the model of care/intervention: HCV care was integrated into the APH project "Micro-elimination of HCV among key populations". 10 field NGOs in 10 regions of Ukraine provided liaison with field HCFs, counselling clients, referrals for diagnosis, treatment, follow-up 12 weeks after the end of treatment, psychological support. To prepare NGOs to support TB people, APH conducted training for social workers on programmatic/clinical issues of TB/HCV co-infection management. The important integral of NGO activities was educational work with TB people on the HCV knowledge transfer and prevention of re-infection. 95% of TB patients were treated for HCV infection by doctors-infections in the departments of oblast TB centres. For 2021-2024, 287 HCV/TB co-infected patients were granted access to a comprehensive package of HCV services.

Effectiveness: Of 287 people with TB/HCV co-infection, 94% (n=267) were PWID; other their partners. 91,5% (n=242) were male with an average age of 44 years. 56 PWID patients had HIV/HCV/TB infections, 98,2% (n=55) of them received ART. 18,4% (n=48) were OST patients. 94% of patients (n=248) completed full treatment course, 5 terminated treatment. 91% (n=147/162) of patients, who showed up for SVR12, reached it.

Conclusion and next steps: Despite multiple infections, 91% of PWID with TB were cured. APH community-based HCV integrated treatment model, implemented by community-level NGOs, has demonstrated significant effectiveness and sustainability for TB patients who use drugs during the war.