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Myanmar Liver Foundation



Acceptability of community-based hepatitis C testing and treatment among people who inject drugs in Yangon, Myanmar

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Burnet Institute

Acknowledgements

All our study participants

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Background

- HCV antibody prevalence in Myanmar – 2.6%
- Higher disease burden among people who inject drugs – 56%
- Challenges of HCV treatment at public hospitals
 - ❑ Long waiting lists
 - ❑ Multiple appointments
 - ❑ Limited clinical workforce

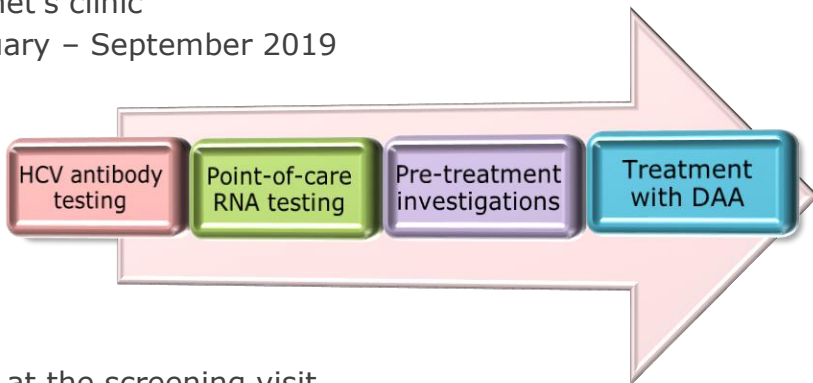
Aim

- To assess the acceptability of community-based HCV testing and treatment among people who inject drugs

Methods

Model of care

- Two community-based clinics – Burnet Institute’s clinic for people who inject drugs and Myanmar Liver Foundation’s clinic for general population
- Staff - a medical doctor, nurse, laboratory technician
- Peer worker employed at the Burnet’s clinic
- Recruitment of participants - January – September 2019



Data collection

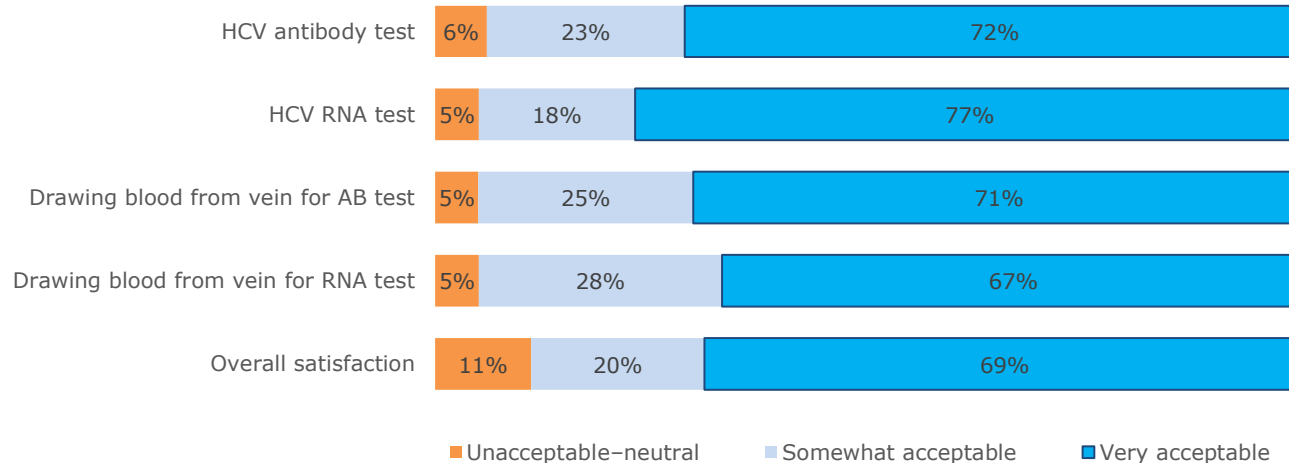
- Quantitative
 - ❖ Baseline behavioural survey at the screening visit
 - ❖ Acceptability survey after HCV antibody and GeneXpert RNA tests
 - ❖ Post treatment (SVR12) survey after RNA test
- Qualitative
 - ❖ In-depth interviews – 15 participants purposively recruited after completing DAA treatment

Survey Results

Participant characteristics – Burnet Institute Clinic

Sex	
• Male	94% (239/253)
• Female	6% (14/253)
Age (mean)	
	34 years (SD=14)
Injected drugs in the past one month	
	77% (185/241)
Currently on methadone	
	64% (161/253)
SVR12 achieved	
	91% (146/161)

Acceptability of service model



Interview Results

- Total 15 participants – 13 males, 2 females
- Average age – 33 years
- 13 were currently on methadone
- Two - not achieved SVR12

*“I take methadone
everyday, so it is okay for
me to come in the morning”
BI02, female*

Key findings

- High satisfaction with one-stop model of care
- Reported short waiting time and convenient blood sample collection by skillful staff
- Some participants experienced more than one attempt of venepuncture due to difficult veins
- Flexible appointment – late morning schedule for those who took daily methadone
- Little or no side effects of treatment with DAA was reported
- Approachable and friendly staff

*“If you ask me or other patients, you
will get the same answer. All are
warm and friendly and besides, they
treated our infection for free..”
BI09, male*

Conclusion

- Key elements that lead to high acceptability
 - One-stop service
 - Short waiting time and flexible appointment
 - Friendly and supportive health care providers
- These service delivery characteristics need to be considered
 - When expanding treatment access to achieve HCV elimination goal
 - To improve engagement with key population groups most affected by HCV



Thank you