

THE IMPLEMENTATION OF HARM REDUCTION AND HEPATITIS C SERVICES FOR PEOPLE WHO INJECT DRUGS IN EUROPE: RESULTS FROM THE 2018 HEP-CORE SURVEY

Palayew A¹, Picchio C², Stumo SR², Metwally AM^{3,4}, Maticic M^{5,6}, Jauffret-Roustide M⁷, Hendrickx G⁸, Korenjak M⁹, Lazarus JV²

1. McGill University Department of Epidemiology, Biostatistics, and Occupational Health
2. Barcelona Institute for Global Health (ISGlobal), Hospital Clínic, University of Barcelona, Barcelona, Spain
3. National Research Centre, Giza, Egypt
4. Association of Liver Patient Care, Dakhlyia, Egypt
5. Clinic for Infectious Diseases and Febrile Illnesses, University Medical Centre Ljubljana, Ljubljana, Slovenia
6. Faculty of Medicine, University of Ljubljana, Ljubljana, Slovenia
7. Cermes 3 (Inserm U988, CNRS UMR 8211, EHESS, Paris Descartes University), Paris, France
8. Viral Hepatitis Prevention Board, Centre for the Evaluation of Vaccination, Vaccine and Infectious Diseases Institute, University of Antwerp, Antwerp, Belgium
9. European Liver Patients' Association, Brussels, Belgium

Background: Due to the high prevalence of hepatitis C virus (HCV) among people who injects drugs (PWID) and prisoners in Europe, they should be priority populations for the elimination of HCV. Where harm reduction services and targeted HCV treatment services for PWID and prisoners exist, there is often limited implementation. This study aims to report on how well policies for these populations are being implemented.

Methods: A survey was disseminated in October 2018 to 30 members of the European Liver Patients' Association, each representing one country, through the REDCap data collection tool. Participants responded to 6 questions, validated through data extraction, about HCV testing and treatment in prisons and harm reduction services in the general population and in prisons in their country. Implementation was measured using a 5-point Likert scale and categorized into positive (completely/mostly-implemented), neutral (moderately-implemented), or negative responses (slightly/not-implemented).

Results: Twenty-five out of 30 patient groups participated. For needle-syringe programs (NSP) and opioid substitution therapy (OST) in the general population, 21/25 countries had a verifiable program. Ten participants responded positively to the implementation of NSPs, 6 neutrally, and 5 negatively. For OST implementation, 14 participants responded positively, 5 neutrally, and 2 negatively. Three countries had NSPs in prisons: 1 country responded neutrally while the other two responded negatively. Of the 16 countries with OST in prisons, 9 responded positively, 3 neutrally, and 4 negatively. Sixteen countries had a verifiable testing/screening and treatment program for HCV in prisons. For testing/screening, 7 participants responded positively, 4 neutrally, and 5 negatively. For HCV treatment in prisons, 9 participants responded positively, 3 neutrally, and 4 negatively.

Conclusion: Patient group respondents reported that harm reduction policies that are already in place can be better implemented across Europe. If HCV is to be eliminated, these services need to be available and accessible in practice.

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