

National Prisons Hepatitis Network: National Consensus Statement on the Management of Hepatitis C in Australia's Prisons

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Background/Approach: As in many other countries, prison settings in Australia represent the highest concentration of prevalent hepatitis C virus (HCV) cases due to high incarceration rates among people who inject drugs. Direct-acting antiviral (DAA) therapies for HCV infection are available to people incarcerated in Australian prisons. However, multiple challenges to health care delivery in prisons present barriers to people accessing HCV testing, treatment, and prevention measures.

Analysis/Argument: Australia's states and territories have implemented local hepatitis programs for people in prison. The Australian National Prisons Hepatitis Network (NPHN) identified a need for a National Statement to unify policy and best practice for HCV testing, treatment, and prevention in custodial centres.

Outcome/Results: The NPHN developed a Consensus Statement which makes 24 recommendations and nominates key performance targets and indicators to set best practice standards in HCV diagnosis, treatment, and prevention in Australian prisons based on available evidence (strength of supporting evidence rated according to the GRADE system). The Consensus Statements calls for high coverage testing, scale-up of streamlined DAA treatment pathways, improved coverage of opioid agonist therapy, and implementation and evaluation of prison needle and syringe programs to reduce HCV infection and reinfection.

Conclusions/Applications: The Consensus Statement will inform policy-making by state and territory governments and clinical practice by service providers in Australia's prisons, and provides a useful foundation for policy and practice in other countries. Prison health services should simplify and improve efficiency in the HCV care cascade, including strategies such as universal opt-out testing, point-of-care testing, simplified assessment protocols, and earlier confirmation of cure. Optimising HCV management in prisons is essential to prevent long term adverse outcomes for a marginalised population living with HCV. Scale-up of testing and treatment in prisons will also make a major contribution towards eliminating HCV as a public health threat by 2030.

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