

DELIVERING DIRECT ACTING ANTIVIRAL THERAPY TO HIGHLY MARGINALISED POPULATIONS IN AN INTEGRATED PRIMARY HEALTH CARE SETTING

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Background:

The Kirketon Road Centre (KRC) is a publicly funded primary health care service in Kings Cross, Sydney. KRC provides prevention, treatment and care of viral hepatitis with a focus on people who inject drugs (PWID). Many studies of direct acting antivirals (DAAs) do not include those with current uncontrolled drug use. The aim of this study was to describe treatment outcomes among highly marginalised PWID treated at KRC.

Methods:

All clients initiating DAA treatment at KRC from March 2016 were included. Demographic, drug use behaviour, clinical parameters and HCV treatment outcomes including sustained virological response (SVR12) were obtained from the clinical database. Multiple options for individualised treatment provision and support were available for all clients.

Results:

A total of 120 clients initiated DAA therapy through 2016. The mean age of these clients was 45 years with 68% male, 28% Aboriginal or Torres Strait Islander, 36% homeless, 73% reported injecting drugs in the last six months, and 25% were receiving opioid substitution treatment. Clinical characteristics include 62% genotype 1, 33% genotype 3, and 12% cirrhosis. Of the 69 clients commencing within a timeframe to permit SVR12 assessment by end 2016, 63 (91%) had a SVR12 test taken, and all 63 (100%) were cured, providing an intention-to-treat SVR12 of 91%. Of the 6 without SVR12 data, one died, two were lost to follow-up during treatment, and three completed treatment but have not attended for SVR12 testing. Only 1 case of HCV reinfection has been identified, although post-SVR12 follow-up is ongoing.

Conclusion:

This study confirms that cohorts of active PWID can be successfully treated for HCV in an integrated primary health care model as treatment outcomes were equivalent to those in non-injecting cohorts. This also demonstrates the feasibility of successfully treating this high risk population with potential public health benefits.

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