

THE IMPACT OF COMMUNITY-BASED RAPID POINT OF CARE TESTING ON ENHANCING UPTAKE OF HEPATITIS C TREATMENT FOR PEOPLE WHO INJECT DRUGS IN NEEDLE AND SYRINGE SERVICES.

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Background: Point-of-care (POC) diagnostics overcome barriers to conventional hepatitis C (HCV) testing in people who inject drugs by allowing testing outside of traditional health services, provision by non-clinical staff and same-day diagnosis. We assessed the feasibility and impact on treatment uptake of POC HCV testing in needle and syringe exchange programs (NSPs).

Methods: Rapid EC was a single arm interventional pilot study conducted in three inner-city community clinics with NSPs. Clinic staff offered clients not currently engaged in HCV care an OraQuick HCV antibody mouth swab test followed by a serum Gene Xpert HCV viral load. Same-day results were offered. Participants received confirmatory standard-of-care blood tests and a follow up appointment for liver fibrosis assessment, results provision and linkage to care. Six months after the intervention, a retrospective clinical audit was performed to determine the number of HCV RNA positive participants who initiated HCV treatment, confirmed by national prescription data (PBS).

Results: 70/ 174 people (40%) who underwent POC testing for HCV were HCV RNA positive on laboratory testing. Of these, 44 / 70 participants (63%) were prescribed HCV therapy and 35 participants (50%) commenced therapy. 26 participants completed treatment < six months (37% of those who were HCV RNA positive), of whom 15 had documented SVR12; 5 people did not complete treatment. Treatment initiation varied by clinic service model, highest at clinics A (76%) and B (71%) where NSPs were embedded within clinics compared with clinic C (27%) which had a co-located but separate NSP ($p < 0.001$).

Conclusion: HCV POC testing through NSPs was effective for linking people diagnosed with hepatitis C into care and treatment. Further studies are needed to define how best to incorporate POC testing into models of care for people who inject drugs to increase HCV treatment uptake and completion rates.

Disclosure of Interest Statement: Cepheid provided loan of one GeneXpert machine and 40 cartridges for the study. JH received funding from Gilead Sciences via the Australia Gilead Research Fellowship (2017). The Burnet Institute, MH and JD receive funding support from Gilead Sciences, Abbvie, Merck and BMS for investigator initiated research. JD receives consultancy funding from Gilead, Abbvie, and Merck. AT serves as an advisory board member for Gilead, Abbvie, BMS, Merck, Eisai, Bayer, has served as speaker for Gilead, Merck, BMS, Abbvie, and received research funding from Gilead, Merck, Abbvie. AP has served as a speaker for Gilead and received research funding from Gilead, MSD and Abbvie.