

The tale of two cities: comparative strategies in hepatitis C testing

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Background/Approach: Hepatitis SA, in collaboration with SA Health Viral Hepatitis Nurses and with funding support from AbbVie, implemented a micro-elimination project in the Riverland region of South Australia. After the completion of this project, we took the lessons learned and then commenced another micro-elimination project in the regional town of Murray Bridge.

Analysis/Argument: Both projects consisted of workforce education being provided to local service providers, followed by hepatitis C Point of Care Testing (HCVPoCT) clinics.

Outcome/Results: The education component of the two projects had great outcomes, the HCVPoCT clinics had very different results. The Riverland HCVPoCT clinics were held in the local pharmacies, with the thought that community could come in and it would be a more discreet location. Instead, the majority of people attending for HCVPoCT were health conscious and engaged with primary health care services and at-risk groups were underrepresented. For the Murray Bridge project, testing occurred out the front of the IGA from 7.30am and engaged with our target group on a much higher scale, we also attended the local 'camp' where many people sleep rough each night, and found a number of people who were living with hepatitis C unknowingly.

Conclusions/Applications: Going to where the target population are is a much more effective strategy in reaching those hidden populations.

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