Challenges in access to hepatitis C care for people who inject drugs in Germany - results from the DRUCK-SURV study 2025

Authors
Gyde Steffen[1], Renke Biallas[1], Dost S[1], Sarma N[1,2,3], Kattner C[1], Winkler L[1], Ruth Zimmermann[1]

[1] Department of Infectious Disease Epidemiology, Robert Koch Institute, Berlin, Germany
[2] Postgraduate Training for Applied Epidemiology, Department of Infectious Disease Epidemiology, Robert Koch Institute, Berlin, Germany
[3] ECDC Fellowship Programme, Field Epidemiology path (EPIET), European Centre for Disease Prevention and Control (ECDC), Stockholm, Sweden

Background
People who inject drugs (PWID) are at high risk for hepatitis C (HCV) and play a crucial role in Germany's efforts to eliminate HCV. To meet WHO's elimination goals, improving access to testing and treatment is essential. The DRUCK-Surv study collected indicators among PWID to identify care gaps and recommend targeted actions.

Methods
Between 01/02/25 and 31/08/25, 2,578 participants aged 16 and older who had ever injected drugs were recruited in 29 German cities through low-threshold drug services and opioid agonist treatment (OAT) practices. Participants were tested for anti-HCV and HCV-RNA and completed a questionnaire on sociodemographics, prevention, risk behavior, and access to HCV care. We analyzed data on infection status, testing experience, infections awareness, and treatment among participants reporting past 12-months drug injection.

Results
Of 1,761 participants, median age was 43 years, and 73% (1,294/1,769) were male. 44% (763/1,739) reported homelessness and 24% (415/1,715) imprisonment in the last 12 months, and 61% (1,058/1,737) were currently receiving OAT. Overall, 57% (988/1,727) had been tested for HCV in the last 12 months. Anti-HCV prevalence was 81% (1,350/1,668), and HCV-RNA prevalence 34% (554/1,734). Among anti-HCV-positive participants, 79% (1,054/1,326) knew about a (previous) infection. Of these, 82% (862/1,054) were ever eligible for treatment (RNA-positive or reported treatment), of whom 72% (615/852) had a positive treatment history. Proportion of ever treated participants was lower among those reporting homelessness (62%;95%-CI [57%-67%] vs 80%;95%-CI [76%-83%]) or imprisonment (61%;95%-CI [54%-67%] vs 76%;95%-CI [73%-79%]), but higher among OAT recipients (78%;95%-CI [73%-81%] vs 63%;95%-CI [57%-68%]).

Conclusion
We found a high prevalence of HCV among PWID. Combined with a low testing rate, infection status awareness level and treatment coverage were below the WHO's respective goals of 90% and 80%. HCV testing and treatment should be integrated into services for homeless people, and scaled up in OAT services and prisons.

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