PREVALENCE OF HEPATITIS C, HEPATITIS B, HIV AND TREATMENT OUTCOME AFTER NURSE-LED HEPATITIS C TREATMENT AMONG PATIENTS ON OPIOID SUBSTITUTION THERAPY

Authors: Holmström Larm H[1], Liljebäck M[1], Haglund M[1], Kamal H[1, 2], Cederberg S[1, 2], Lindahl K[1, 2], Rosén K[1], Aleman S[1, 2]

[1]Department of Infectious Diseases, Karolinska University Hospital, Sweden.
[2]Department of Medicine Huddinge, Karolinska Institutet, Sweden.

Background: Recent data on prevalence of hepatitis C virus (HCV) infection among persons on opioid substitution therapy (OST) is scarce, as well as data on nurse-led treatment models in Sweden. We aimed therefore to estimate the prevalence of hepatitis C virus (HCV), hepatitis B virus (HBV) and human immunodeficiency virus (HIV) among patients on OST in Stockholm. A secondary aim was to estimate the outcome after nurse-led HCV-treatments.

Methods: A cross-sectional study was conducted, with one group in October 2018 (n=543) and another in October 2019 (n=525). All patients attending 5 different OST-clinics in "Beroendecentrum Stockholm" (BCS) at these time-points were included. Data of hepatitis C antibodies (HCV-ab), HCV-RNA, hepatitis B surface antigen (HBsAg) and HIV status were collected from medical records. A nurse-led model of protocol-driven assessment and HCV-treatment was introduced at the OST-clinics. Sustained virological response (SVR) was defined as negative HCV-RNA at follow up 12 weeks (FU12) after treatment end.

Results: The mean age of participants was 49.2 and 48.7 years in group one and two, respectively. The majority were men; 71.6% (in both groups). Frequency of ever HCV-ab testing was 72.4% and 74.9%, respectively. Positive HCV-ab was noted in 83% (326/393) and in 78.9% (310/393), respectively. HCV-RNA viremia was detected in 41.5% and 20.5%, respectively. 82% were tested for HBsAg and 83.1% for HIV. Among them, 1.5% were HBsAg positive and 9.1% HIV-positive. Intention-to-treat SVR was 93.8% (75/80) and per protocol SVR was 98.7% (75/76) after nurse-led treatments.

Conclusion: The prevalence of HCV viremia in OST-clinics is high in comparison to the general population, which indicates an important arena for elimination. Routine screening for hepatitis needs to be improved in OST-clinics. The nurse-led model of treatment achieved high cure rates, indicating possible recommendation of introducing this model to other regions of Sweden.

Disclosure of Interest Statemen: This study has been within Linkage-C project, which has been financially supported by AbbVie, Gilead and MSD, and in corporation with ICT Health Support and Karolinska University Hospital.

Soo Aleman has received honoraria for lectures/consultancy from AbbVie, BMS, Gilead, MSD, and has received research grants from AbbVie and Gilead.