The HCV drug policy similarity score among countries in the EU/EEA, and the UK

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Introduction

- The World Health Organization (WHO) in 2016 committed to eliminating hepatitis C by 2030, highlighting people who inject drugs (PWID) as a priority population.

- To reach the elimination goals there is need for policies to address hepatitis C in PWID.

- The aim of this study was to identify the policy and implementation gap from a patient group perspective.

Methods

- We surveyed 20 member organizations (one per country) of the European Liver Patients Association (ELPA).

- The survey was distributed in October of 2018 and asked about the implementation of eight policies in place. NSP in community, OST in community, NSP in prison, OST in prison, test/screening for HCV in prison, HCV treatment in prison, drug/alcohol restrictions for HCV, and fibrosis restrictions for HCV.

- Once the data were collected, they were coded as 0 (no policy), 1 (policy in place but not implemented), and 2 (policy implemented).

- We then applied a multiple correspondence analysis (MCA) to generate similarity scores based on the responses.

- We standardized the results to range from 0-10 (best) and included fictitious reference countries (ElimiNation, ProcrastiNation, and StagNation) to contextualize results.

Results descriptive

- Responses from the different respondents across the study sample for four of the selected variables in the score.

- Variation of how policies were functioning in practice varied with different levels of implementation across countries. There was also variation within countries with how well certain policies were being implemented e.g. Ukraine, Sweden, and Finland.
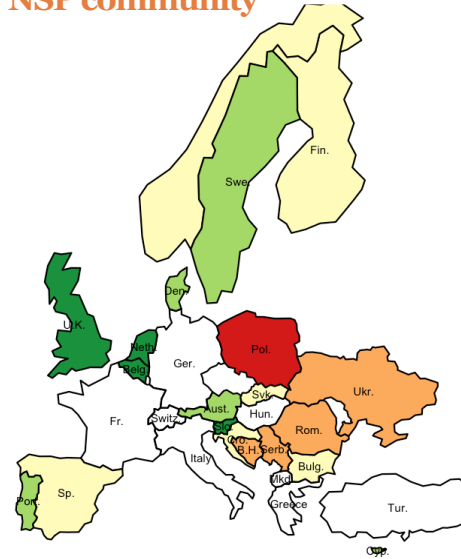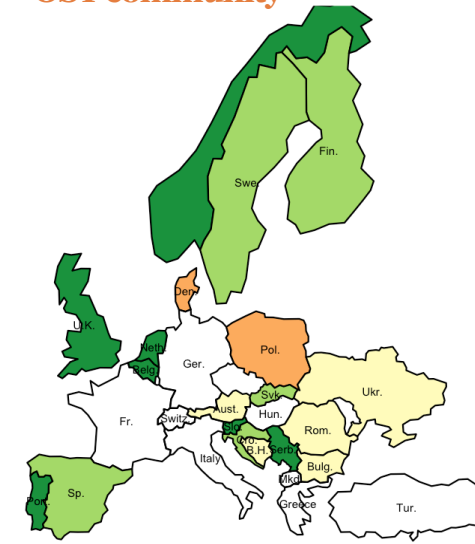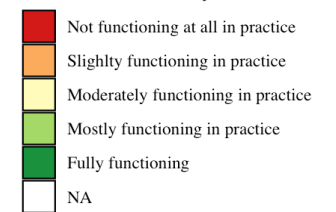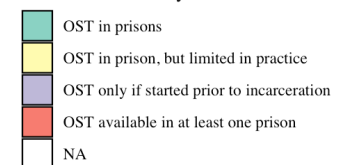
Results MCA
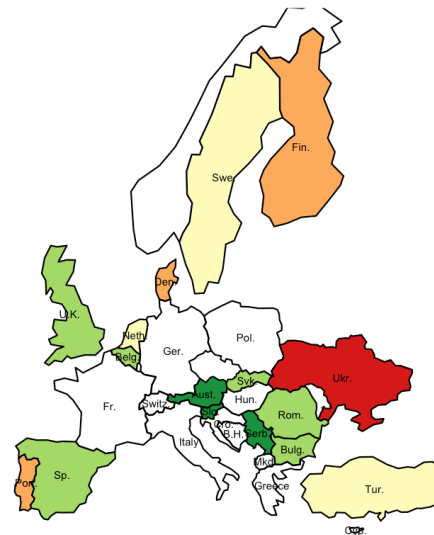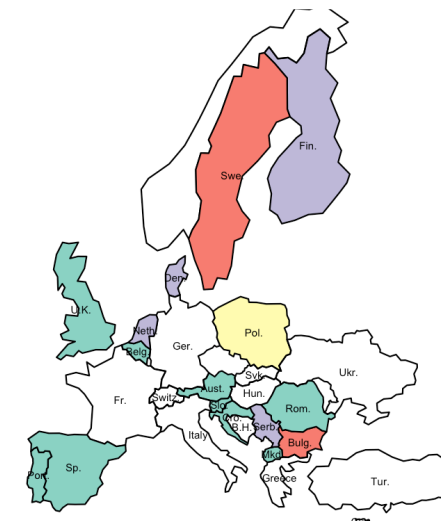
- The MCA found that there were two dimensions that explained 44%, and 35% of the variation in the dataset for a total of 79% of the variation explained (figure).

- The first similarity score (y-axis) indicates the total number of policies that were in place.

- The second similarity score (x-axis) is about the implementation of policies in place. Spain was the only country that had all policies in place and implemented. Poland had the lowest implementation level for the policies and Bosnia Herzegovina was the lowest ranked country for policies in place.

Figure: The scores for HCV drug policy implementation and policies in place for the surveyed countries (n= 20)
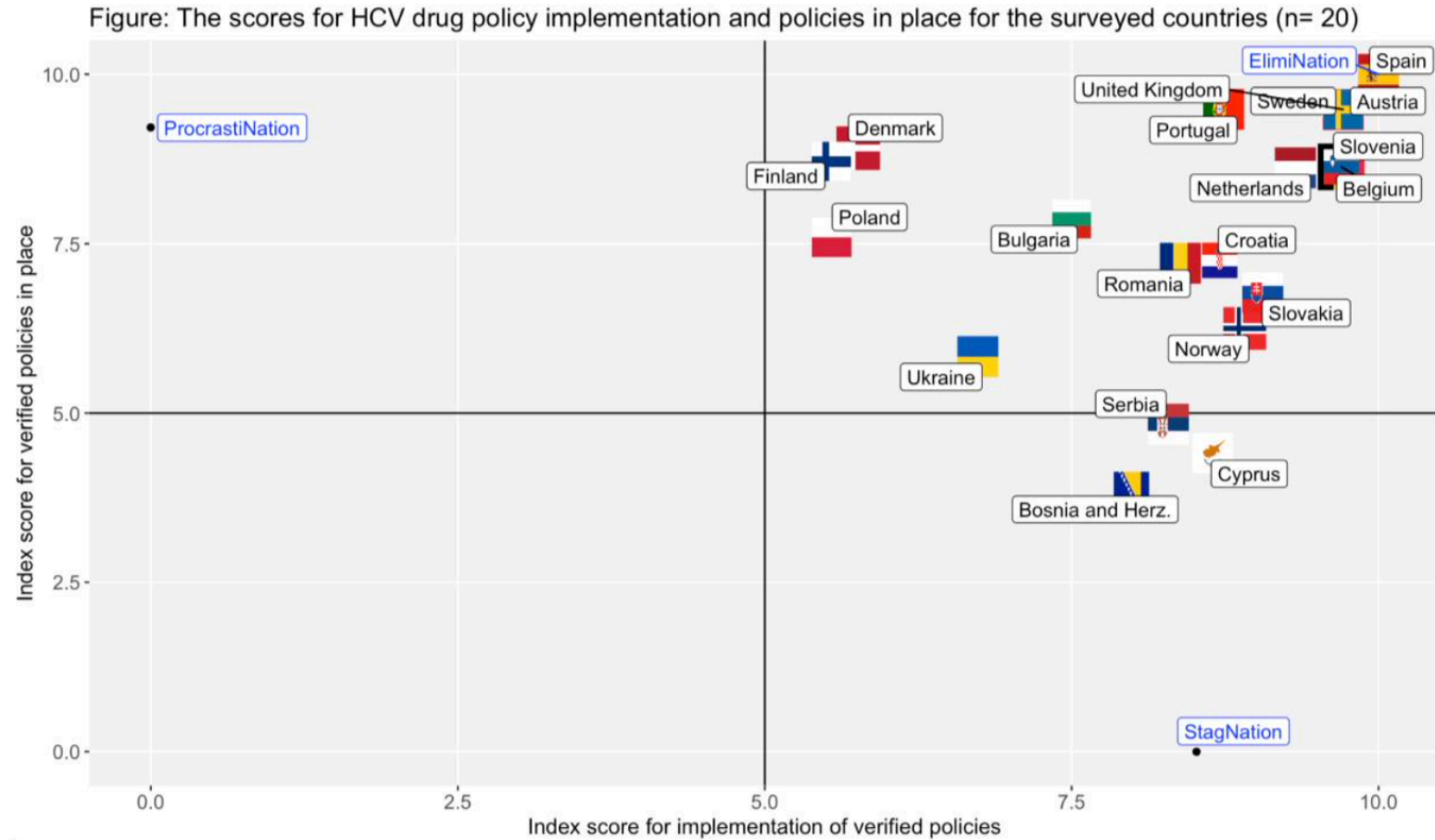
Conclusion

- We were able to look at whether policies were implemented in practice, which is an advantage of this study. This comes down to, do countries walk the walk or do they just talk the talk.

- We found that major gaps exist in the actual implementation of harm reduction and HCV drug related policies.

- If the countries in the study are to meet the WHO HCV elimination targets, there is a need for all countries to have all relevant policies and for better implementation of policies in practice.