DECENTRALISING HEPATITIS AND OPIATE SUBSTITUTION THERAPY SERVICES IN SOUTH AFRICA THROUGH MOBILE CLINIC SERVICES

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Background:

People who use Drugs have challenges in accessing fixed public health facilities and non-governmental Drop-in Centres due to far distances from hotspots and public transport being limited or too expensive. Many treatment patients are therefore unable to attend OST daily observed dosage (DOTS) appointments as expected during the stability phase. Poor OST retention has a domino effect with other treatment adherence such as TB, DAAs and ART medication.

Description of model of care/intervention:

In November 2023, NACOSA piloted the decentralisation model by its district implementers bringing services directly to PWUD in Ekurhuleni and Sedibeng hotspots through mobile clinics. Outreaches with a doctor and nurse was scheduled to screen and initiate PWUD on methadone and HCV treatment. Psychosocial counsellors accompanied to support adherence strategies.

Effectiveness:

The decentralized innovation of taking the daily observed dosage requirement to outreach sites increased OST retention from 67% in November 2023 to 91% in November 2024. This further increased uptake of Hepatitis C treatment and its treatment completion, with only 365 Hepatitis screenings, 122 DAA initiations, 107 treatment completions and 63 viral suppression reported in October 2023, whereas after mobile clinics piloted, services and performance increased to 1059 screenings, 324 DAA initiations, 199 treatment completions and 90 viral suppressions reported in November 2024. Also with HIV VL suppression, an improvement from 33% VL suppression in November 2023 to 42% in November 2024 as ART treatment was decentralised through mobile clinics.

Conclusion and next steps:

Mobile clinics improve programme performance and treatment adherence. Expansion of mobile clinic services to support harm reduction and its treatment efforts are needed. Not only do patients no longer have to worry about transportation and harassment when travelling to facilities but visible methadone and hepatitis mobile clinic services promotes positive messaging to the public; securing their support of harm reduction services.

Disclosure of Interest Statement: See example below:

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