

High uptake of direct-acting antiviral therapy for HCV and reduction in population-level viremic prevalence: Progress toward achieving HCV elimination among people who inject drugs

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Background/Aims

Background: Australia has had unrestricted government subsidised direct-acting antiviral therapy for HCV since March 2016.

Aims: Gauge the progress toward eliminating HCV among people who inject drugs by measuring

- HCV treatment uptake
- Current HCV infection





Methods:



ETHOS Engage- observational cohort study collecting baseline data on HCV treatment uptake and current prevalence

Location: opioid substitution treatment (OST) clinics, needle and syringe provision sites throughout Australia

Inclusion criteria:

- ☑ Written informed consent;
- ☑ History of injecting drug use;
- ☑ Recent injecting drug use (previous 6 months) OR currently receiving OST.

Exclusion criteria:

Campaign days: May 2018 – September 2019

Data to: 25 July 2019, 23/25 sites





Methods: ETHOS Engage campaign days

5. Clinical Assessment

Consultation with clinic nurse

4. Participant Survey

Demographics Injecting history HCV experience



1. Study Enrolment Informed consent

Clinic Waiting Area



Peer support worker

2. Point-of-care testing GeneXpert & DBS

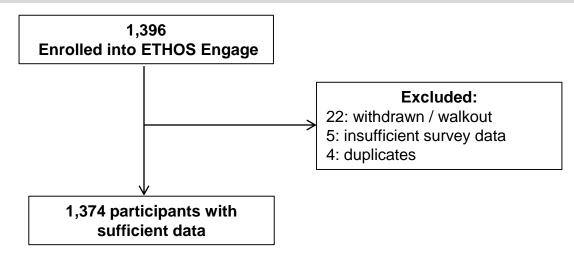


3. Fibroscan
Median stiffness





ETHOS Engage Results: Participant Disposition







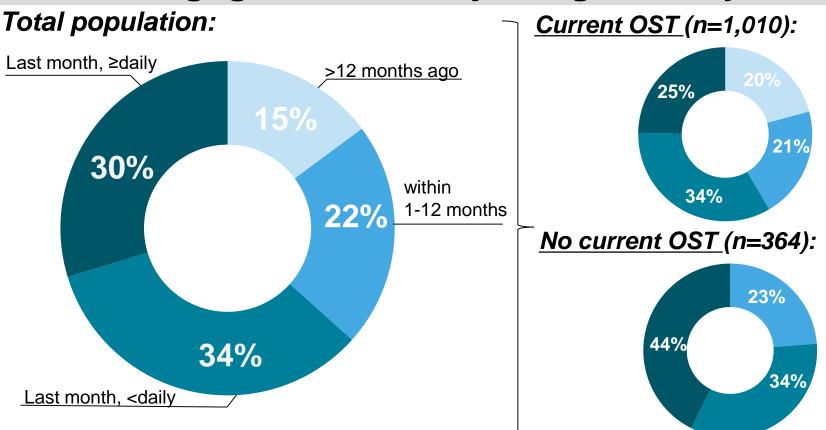
ETHOS Engage Results: Demographics

- 1,374 participants Mean age: 43 (SD: 10); 64% male; 24% Indigenous ethnicity
- 155 (11%) currently homeless
- 941 (68%) ever imprisoned,
 257 (19%) within last year
- ❖ 1010 (74%) currently receiving opioid substitution therapy
- ❖ 506 (37%) excessive alcohol consumption as defined using AUDIT-C





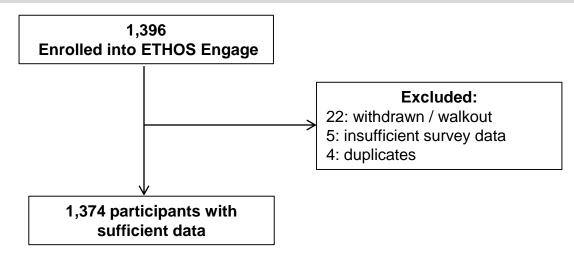
ETHOS Engage Results: Injecting recency







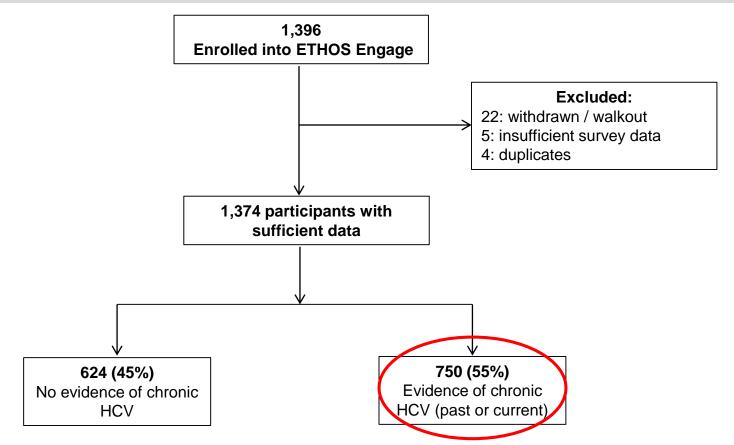
ETHOS Engage Results: Participant Disposition







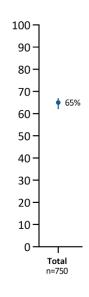
ETHOS Engage Results: Participant Disposition







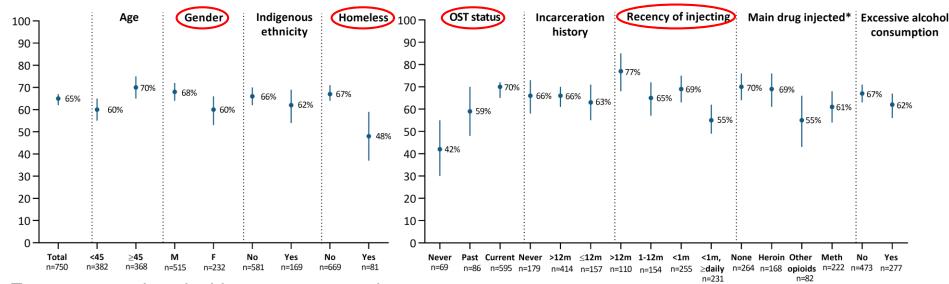
ETHOS Engage Results: HCV treatment uptake







ETHOS Engage Results: HCV treatment uptake



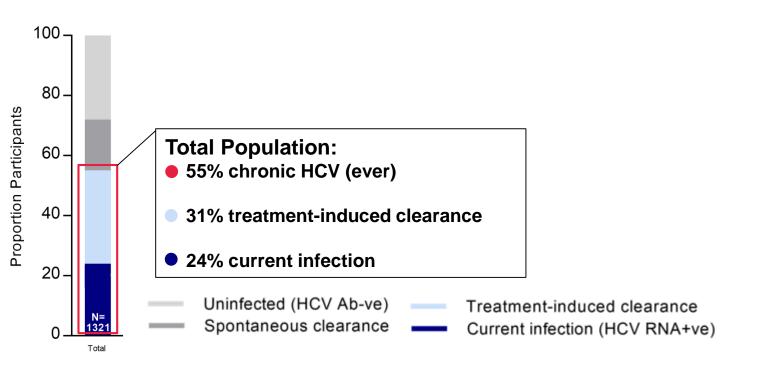
Factors associated with treatment uptake:

- **Female,** aOR: 0.67, 95%CI: 0.47 0.95
- Homelessness, aOR: 0.59, 95%CI: 0.38 0.96
- Current OST, aOR: 2.54, 95%CI: 1.48 4.39
- ≥Daily IDU, aOR: 0.50, 95%CI: 0.29 0.86





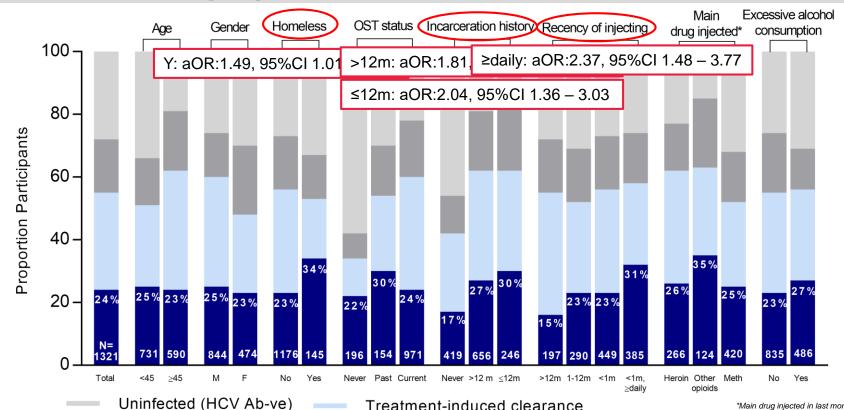
ETHOS Engage Results: Current HCV prevalence







ETHOS Engage Results: Current HCV prevalence



Current infection (HCV RNA+ve)

Spontaneous clearance

*Main drug injected in last month, excludes data for participants never injecting in last month (n=487) and those injecting other drugs (n=24); variable not used in adjusted analysis due to collinearity with recency of injecting





Conclusions

- Unrestricted DAA access in Australia has produced high treatment uptake among people who inject drugs, across marginalised populations
- High treatment uptake has led to subsequent reduction of HCV viremic prevalence, with 56% of those ever chronically infected having evidence of treatment-induced clearance
- To maintain momentum toward HCV elimination and achieve targets, sub-populations with significantly higher viremia and those significantly less likely to initiate HCV therapy may require additional support to encourage engagement with HCV care





ETHOS Engage: Future direction



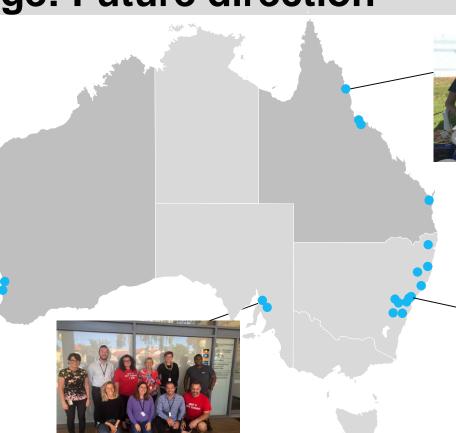
Wave 1:

- Complete!
- Treatment uptake and outcomes assessed

Wave 2:

- Revisiting all sites
- POC RNA test results available same day
- · Prescriber onsite















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