

THE POWER OF NURSING: DRIVING HEPATITIS C MICRO-ELIMINATION WITHIN NEW BRUNSWICK'S INJECTABLE OPIOID AGONIST THERAPY PROGRAM

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Background:

River Stone Recovery Centre (RSRC) has been a leader in removing policy barriers to Hepatitis C Virus (HCV) treatment in New Brunswick. Many individuals face obstacles such as restrictive eligibility criteria and delays in treatment. RSRC's nurse-led initiative streamlines access to Direct-Acting Antiviral (DAA) therapies, implements innovative testing methods, and advocates for policy changes that led to HCV micro-elimination within the injectable Opiate Agonist Therapy (iOAT) program.

Description of model of care:

RSRC's nurse-led model engages Licensed Practical Nurses (LPNs), peers, and students in HCV screening, assessment, patient education, and fostering trust through mobile outreach and liver health events. The model prioritizes rapid treatment initiation, utilizes dried blood spot testing (DBST) in Indigenous and rural communities, and incorporates a GeneXpert machine for on-site HCV diagnosis. Nurses screen patients and present cases to prescribers who oversee treatment. RSRC also collaborates with Action Hepatitis Canada (AHC) to advocate for policy reforms.

Effectiveness:

In October 2022, 70% of iOAT participants had active HCV infections. After securing prescriptive authority in November 2022, treatment was expedited reducing infections to 50% by December 2022. Micro-elimination was achieved in September 2024 when rates dropped below 16%. Integrated HCV treatment reduced loss to follow-up, while harm reduction efforts minimized reinfection. In February 2024, a provincial policy change eliminated genotype and fibrosis score prerequisites, further improving access.

Conclusion and next steps:

RSRC's nurse-led rapid access model has demonstrated significant success in overcoming treatment barriers and advancing HCV micro-elimination through policy advocacy, innovative HCV screening methods, and the integration of harm reduction into treatment pathways. The model's success underscores the importance of expanding GeneXpert testing for same-day treatment and increasing awareness of policy shifts that facilitate nurse-led HCV care. By prioritizing patient-centered approaches and continued advocacy, this model has the potential to be adapted within other jurisdictions seeking to eliminate HCV among high-risk populations and eventually same-day starts.

No Disclosures of Interest to declare