

“You don’t want to be waiting. Just get on with it”: Findings from the QuickStart study

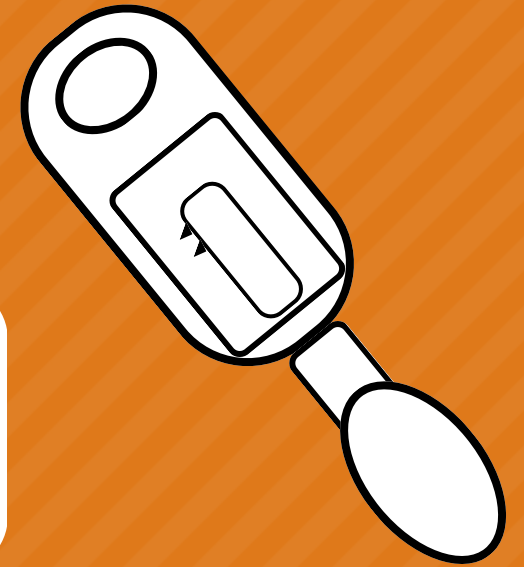
Background

- Accessing hepatitis C virus (HCV) treatment involves multiple steps
- Advances in point of care (POC) testing means it is now possible to diagnose HCV and provide treatment in a single visit

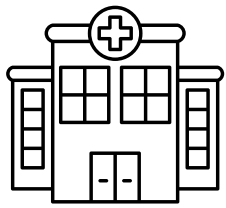
Aim

To explore experiences with 3 interventions among people who have ever injected drugs:

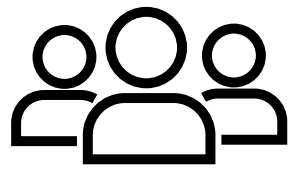
- Arm A: POC antibody test and standard care
- Arm B: POC antibody test, POC RNA test and standard care
- Arm C: POC antibody test and same day treatment offered following a positive antibody result



Methods



Cluster randomised controlled trial at Australian primary healthcare clinics (1)



Qualitative sub-study: Interviews with participants and service providers

17

participant interviews

- Arm A (n=4), Arm B (n=5), Arm C (n=8)
- Around half were male (n=9)
- 10 had injected in past 6 months
- 12 on opiate substitution therapy

Framework analysis

We drew on the consolidated framework for implementation research and the capability, opportunity, motivations framework

1. Doyle et al. (2024). Same-visit hepatitis C testing and treatment to accelerate cure among people who inject drugs (the QuickStart Study): a cluster randomised cross-over trial protocol. doi: 10.1136/bmjopen-2023-083502

Capabilities

Compared to venepuncture, most participants found POC testing quick and easy. Some Arm B participants felt that waiting >60 minutes for a POC RNA result was too long given they had busy lives and family responsibilities.

“I have my situation with my veins and in the past not being able to get blood tests for medication. I just thought that just makes it so much more accessible”

Opportunities

Across study arms, clients valued support from a friendly and non-judgmental study nurse. For Arm C participants, provision of free medication on the same day made commencing HCV treatment an easier choice. However, some Arm C participants preferred to wait for confirmation of their HCV status from venepuncture to avoid starting medication they may not need and experiencing potential side effects like tiredness

“he’s easy going and he, I don’t know, I guess, he kind of treated me like a human being and not like some disease”

“it was just bang – went around there on Monday and now I’m on it...It was all done that day. That was a big thing. It made me feel good cus I’m doing something about it”

Motivations

Across study arms, participants were motivated to take part in QuickStart to improve their health and ensure they were around for their families in the future. Financial incentives (\$40 for a POC test and \$80 for a 12-week follow-up visit after treatment) were perceived as an added bonus.

“we ended up walking out with an extra 80 bucks and I was like awesome, not only did we just mend our health a little bit and start something, but you know, it made our day a little bit easier”

Conclusion: POC testing and same-day treatment addressed some barriers to accessing HCV care. Other important factors included non-judgmental nurses, an opportunity to improve health and financial incentives.

Douglass CH, Vella-Horne D, Elsum I, Allardice K, Guzman R, Heath K, Higgs P, Hellard M, Wade A, Bryant M, Walsh L, Lancaster K, Rhodes T, Moullin J, Stoove M, Doyle J, Pedrana A.

✉ caitlin.douglass@burnet.edu.au. QuickStart funded by Gilead Sciences and NHMRC Clinical Trials Grant

