

## Optimizing linkage to hepatitis C care for untreated individuals released from Quebec provincial prisons: The Beyond Prison Walls Study

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**Background:** Only 15% of people with chronic hepatitis C virus (HCV) are linked to HCV care following release from provincial prisons in Quebec, Canada. We evaluated the impact of a prison-based model of care in the largest adult male Quebec provincial prison on linkage to HCV care following community re-entry.

**Methods:** We conducted a prospective, single arm study; men sentenced 2-12 weeks were approached. Participants underwent nurse-led point-of-care HCV-antibody (HCV-Ab) testing (fingerprick OraQuick® test). HCV-Ab+ individuals underwent confirmatory HCV RNA testing via venipuncture. HCV RNA+ individuals were assessed by a social worker, who provided community referrals, and a patient navigator, who accompanied participants to their post-release appointment. The primary outcome was linkage to care, defined as the proportion of individuals who presented to their HCV appointment within 30 (“early linkage”) or 90 (“delayed linkage”) days from release. Secondary outcomes included the proportion of released individuals who initiated direct-acting antivirals (DAAs), completed DAAs, and achieved sustained virologic response (SVR).

**Results:** From January 7, 2020 to February 15, 2023 (interrupted by the COVID-19 pandemic), 369/513 (72%) incarcerated individuals were included. Overall, 36 (10%) were HCV-Ab+ and 13 (36%) were HCV RNA+ (0 co-infected with HIV). Median age was 45 years; 10 (77%) self-identified as White and seven (54%) reported injection drug use one week prior to incarceration. Of the 13 who were released from prison, nine (69%) were linked to care, five within 30 and four within 90 days of release. Of these, seven (78%) initiated and five (71%) completed DAAs and, among the three with SVR data, three (100%) achieved SVR.

**Conclusion:** A multidisciplinary model of care increased linkage to HCV care by five-fold among untreated individuals released from a Canadian provincial prison. Public policy should support similar models of care to promote linkage and treatment uptake in this high-risk population.

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