A BASELINE ASSESSMENT OF THE HEPATITIS C VIRUS SCREENING RATE OF PATIENTS ENROLLED AT AN OPIOID AGONIST TREATMENT CLINIC BEFORE THE COVID-19 PANDEMIC

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Introduction and Aims: Prior to the PBS listing of Direct Acting Antiviral medications, estimates of the prevalence of Hepatitis C Virus (HCV) amongst people who inject drugs was in the range of 50%. Opioid Agonist Treatment (OAT) clinics have a large proportion of patients who inject drugs. Therefore, these clinics present an excellent opportunity to identify and treat patients with HCV. Despite this, it remains unclear as to how thoroughly these clinics have been screening patients, both pre and post COVID-19 pandemic. This study aimed to establish baseline data on the rate of HCV screening of patients that enrolled into treatment at an OAT clinic before the pandemic.

Design and Methods: A retrospective medical record audit was conducted of patients who commenced OAT between January 2018 and June 2019, who had a history of injecting drug use. The rate of HCV screening was assessed.

Results: A total of 99 episodes of care were analysed. Of these, 73.7% (73) were male and 48.5% (48) were on methadone. The mean age was 39.5 years old. Successful screening for HCV occurred in 55.6% (55) of these episodes. Of those screened, 25.5% (14/55) were HCV ribonucleic acid positive. There were no statistically significant differences in gender, age and OAT medication between those that were screened and those that were not.

Discussions and Conclusions: To improve the screening rate, the clinic could consider providing dried blood spot testing at commencement of OAT treatment or having a clinician capable of venepuncture at the clinic.

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