

PS4/01 HEPCHECK- ENHANCING HCV IDENTIFICATION AND LINKAGE TO CARE FOR VULNERABLE POPULATIONS THROUGH INTENSIFIED OUTREACH SCREENING



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HOSPITALUL CLINIC DE BOLILE INFECTIOASE SI TROPICALE DR. VICTOR BABES

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ROMANIA

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INTRODUCTION: Hepcare Europe is an EU-supported project involving collaboration between five institutions across four member states: Ireland, UK, Spain and Romania.

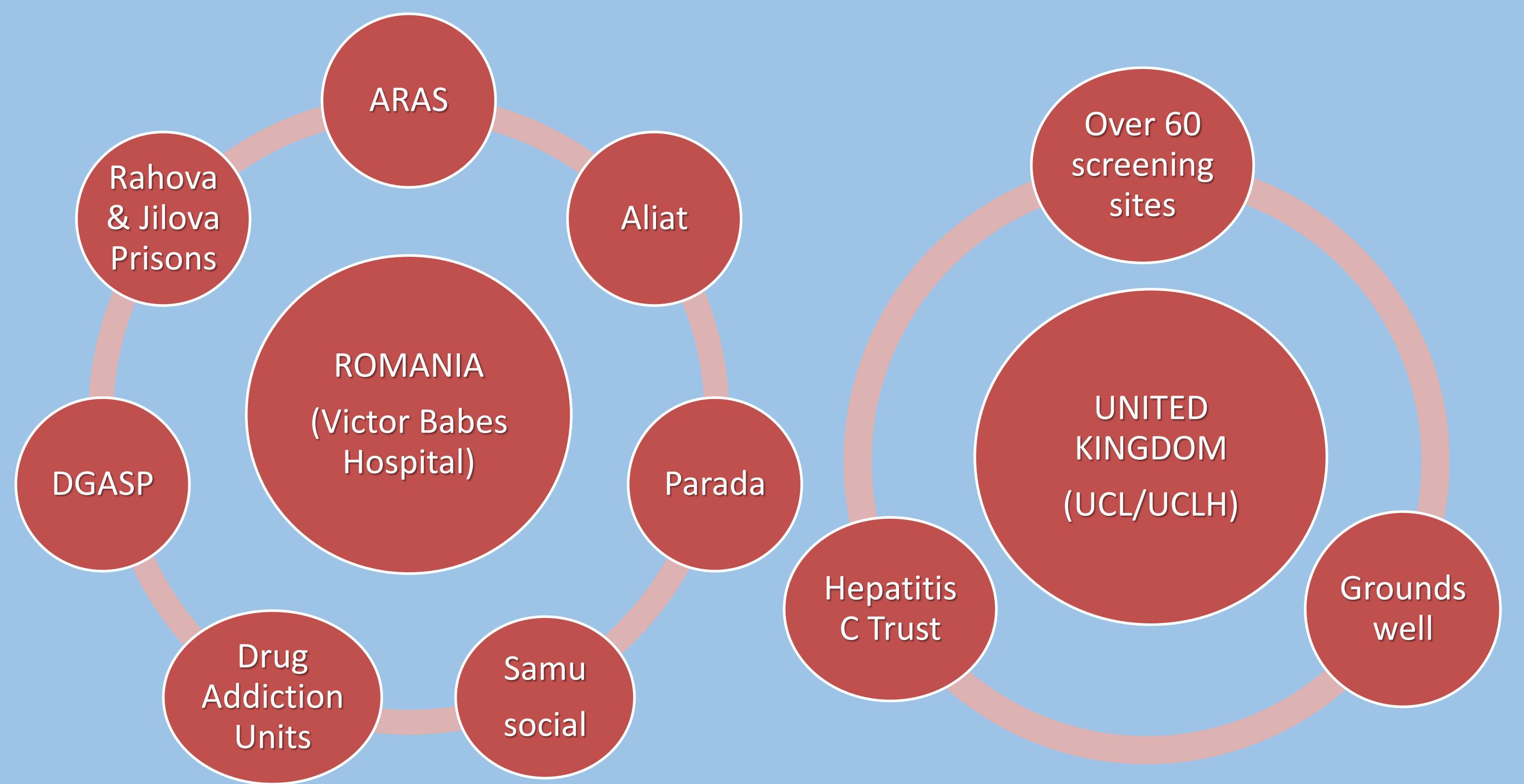
OBJECTIVES: The project aims to develop, implement and evaluate interventions to improve HCV diagnosis, evaluation and treatment among PWID and linked groups. The HepCheck component of HepCare focuses on screening and enhanced identification of HCV infection among vulnerable populations and linking them to care.

METHODS: Extensive community networks had to be established to enable screening at a large number of sites. Sites across four European countries were engaged in the study and utilized purposive sampling to offer screening to 2822 individuals from high-risk populations in community addiction, homeless and prisons services. Screening included a self-administered questionnaire, HCV Ab and RNA testing, fibroscanning and referral to specialist services.

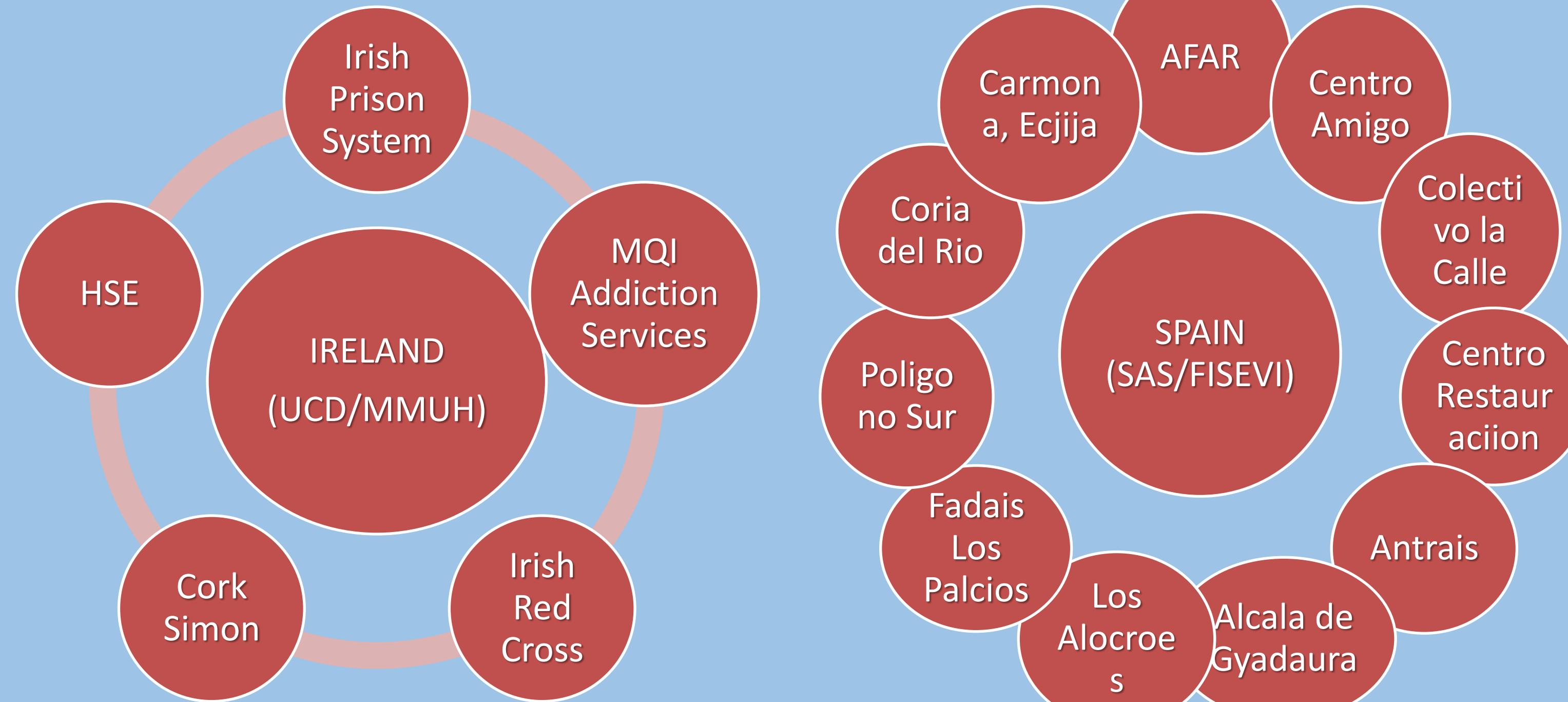


Table 1 Service type across sites

	Ireland	UK	Romania	Spain	Total
Homeless	2	41	3	1	47
Addiction	1	17	3	8	29
Service					
Prison	1	0	2	0	3
Other	0	9	1	1	11
Total	4	67	9	10	90



HEPCHECK NETWORKS



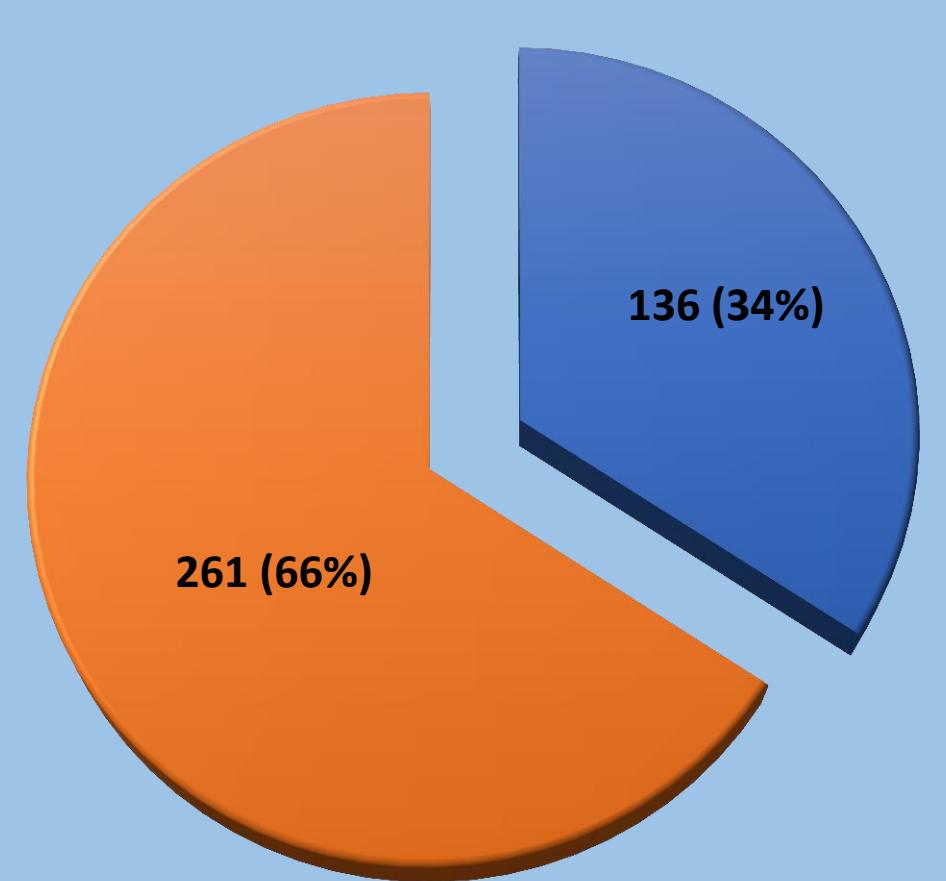
2822 Offered HCV screening

1783 (85.8%) Screened

769 (37%) HCV Ab Positive

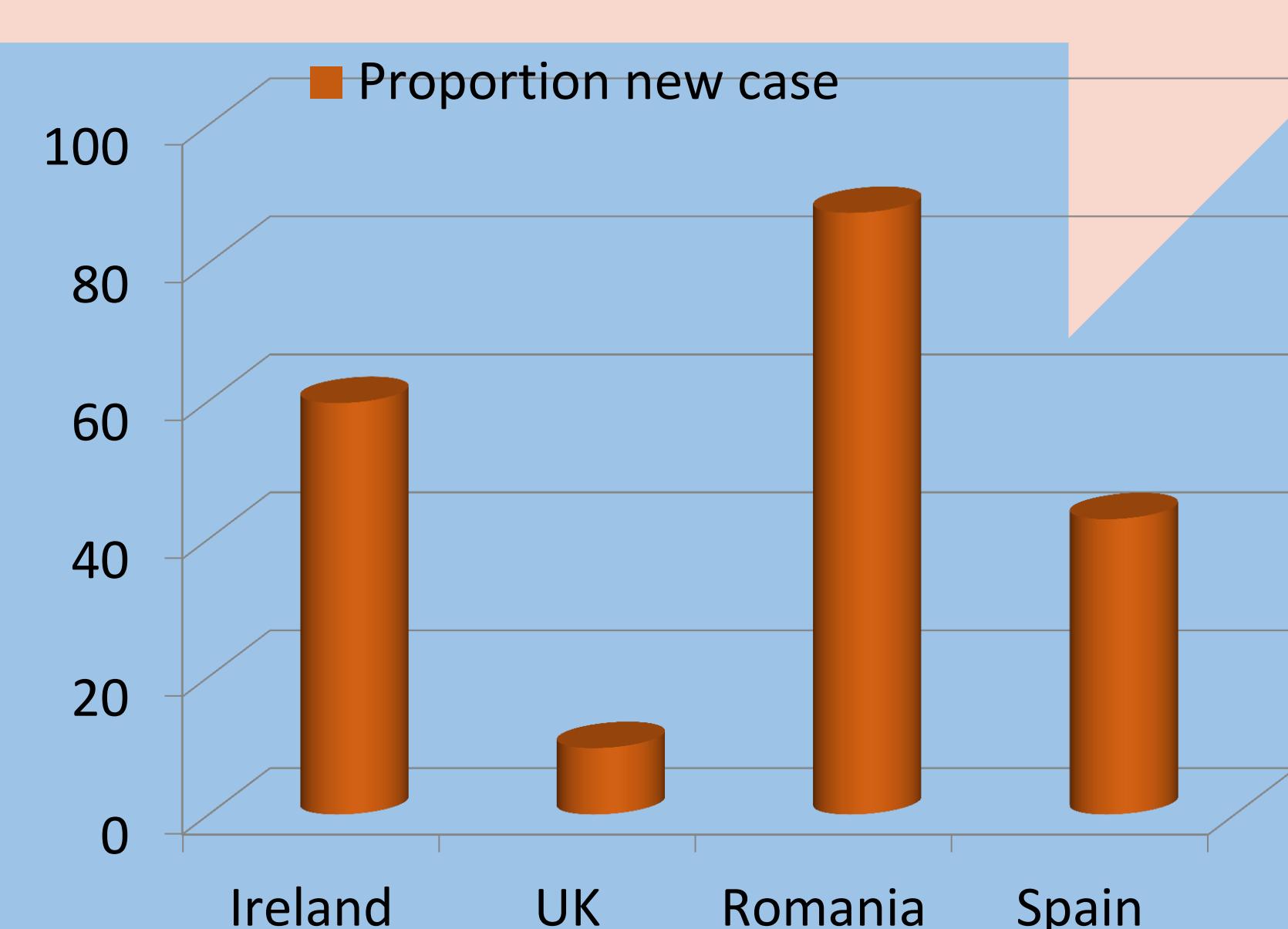
397 (19%) HCV RNA Positive

316 (80%) Linked to care



■ Newly diagnosed
■ Previous known diagnosis

HCV RNA Positive	N=397	%
Injected Ever	340	86%
Homeless Ever	230	58%
Tattoo	168	42%
Piercing	102	26%
Blood Transfusion	33	8%
STI Test	18	5%



Results: Of the 2822 offered screening, there was a 74% (n=209) uptake. The majority (85.8%, n=1783) of the group were male. In total 44.6% (n=927) of the sample reported ever injecting drugs, 38.4% (n=799) reported ever being homeless and 27.9% (n=581) of the sample were prisoners. In total 397 (19%) of active HCV infections were identified and 136 (7% of total sample and 34% RNA positive) were new cases. Of those RNA positive, 80% were linked to care which included fibroscanning and referral to specialist services.

Conclusion: HepCheck's screening and linkage to care strategy is a clear strategy for reaching high-risk populations including those at highest risk of transmission who are not accessing any type of care in the community. The collaborative approach with prisons, community settings, NGOs and medical institutions was key to the roll out of the large scale screening initiative. Viral elimination of HCV in the EU will only be achieved by such innovative, patient-centred approaches.

- REFERENCES**
- World Health Organization. Global Hepatitis Report, 2017 [Internet]. Geneva; 2017 [cited 2018 Apr 30]. Available from: <http://apps.who.int/iris/bitstream/handle/10665/255016/9789241565455-eng.pdf;jsessionid=39DE8B60B231C47D1E3BD37BFE9CB595?sequence=1>
 - C Chen, E. a. M., T. (2006). "The Natural History of Hepatitis C Virus (HCV) Infection." *Int J Med Sci* 3(2): 47-52.
 - Global Hepatitis Report 2017. Geneva: World Health Organization; 2017. Licence: CC BY-NC-SA 3.0 IGO <http://www.who.int/hepatitis/publications/global-hepatitis-report2017/en/>
 - Zuure FR, Urbanus AT, Langendam MW, Helsper CW, Van Den Berg CHSB, Davidovich U, et al. Outcomes of hepatitis C screening programs targeted at risk groups hidden in the general population: A systematic review. *BMC Public Health* [Internet]. 2014 Dec 22 [cited 2017 Dec 3];14(1):66. Available from: <http://bmcpublichealth.biomedcentral.com/articles/10.1186/1471-2458-14-66>
 - Hope, V. D., I. Eramova, D. Capurro and M. C. Donoghoe (2014). "Prevalence and estimation of hepatitis B and C infections in the WHO European Region: a review of data focusing on the countries outside the European Union and the European Free Trade Association." *Epidemiol Infect* 142(2): 270-286.
 - EMCDDA (2017). European Drug Report 2017: Trends and Developments. Luxembourg.
 - Fazel S, Geddes JR, Kushel M. The health of homeless people in high-income countries: descriptive epidemiology, health consequences, and clinical and policy recommendations. *Lancet*. 2014 Oct 25;384(9953):1529-40. doi: 10.1016/S0140-6736(14)61132-6.
 - Lambert J.S, Murtagh R, Menezes D, O'Carroll A, Murphy C, Cullen W, McHugh T, Avramovic G, Tinago W, Van Hout M.C. Hepcheck Dublin. An intensified Hepatitis C Screening Programme in a homeless population demonstrates the need for Alternative Models of Care. *BMC Infectious Diseases* (In press)
 - Morano JP, Zelenov A, Lombard A, Marcus R, Gibson Bam Altice FL. Strategies for Hepatitis C Testing and Linkage to Care for Vulnerable Populations: Point-of-Care and Standard HCV Testing in a Mobile Medical Clinic. *J Community Health*. 2014;39(5):922-934.
 - Bruggmann, P. and J. Grebely (2015). "Prevention, treatment and care of hepatitis C virus infection among people who inject drugs." *Int J Drug Policy* 26 Suppl 1: S22-26.
 - Arora S, T. K., Murata G, Deming P, Kalishman S, Dion D, Parish B, Burke T, Pak W, Dunkelberg J, Kistin M, Brown J, Jenkusky S, Komaromy M, Qualls C (2011). "Outcomes of Treatment for Hepatitis C Virus Infection by Primary Care Providers." *N Engl J Med* 364: 2199-2207.
 - Grebely, J., M. Alavi, M. Micallef, A. J. Dunlop, A. C. Balcomb, N. Phung, M. D. Weltman, C. A. Day, C. Treloar, N. Bath, P. S. Haber, G. J. Dore and E. S. Group (2016). "Treatment for hepatitis C virus infection among people who inject drugs attending opioid substitution treatment and community health clinics: the ETHOS Study." *Addiction* 111(2): 311-319
 - Ward JW. Testing for HCV: the first step in preventing disease transmission and improving health outcomes for HCV-infected individuals. *Antivir Ther*. 2012;17: 1397-1401.
 - Hatzakas A, Hepatitis C Elimination in Europe European Policy Guidelines, Co-Chair Hepatitis B and C Public Policy Association ASBL Registration No: F7987 Report November 2017
 - Negro F. Epidemiology of hepatitis C in Europe. *Dig Liver Dis*. 2014;46 Suppl 5:S158-S164.
 - <https://ecdc.europa.eu/en/publications-data/surveillance-hepatitis-b-and-c-eueea-2016-data>



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