LESSONS LEARNED IN ALABAMA'S HCV WORK WITH THE PWID POPULATION.

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Background: The challenge of addressing Alabama's Hepatitis C (HCV) epidemic has been compounded by the opioid epidemic assailing this southern Appalachian state. Screening and diagnosis of HCV is only a first step in addressing this challenge.

Description of model of care/intervention: We implemented a community screening program, to target vulnerable populations. To meet this target, we partnered with Federally Qualified Health Centers (FQHCs) and Medication Assisted Treatment (MAT) sites. We also implemented a CME based training program to improve access by enabling primary care and MAT providers to manage and treat HCV.

Effectiveness: Between 2018-2019, we screened a total of 13,021 patients and detected a sero-positivity of 16% (2097/13021). The sero-positive rate in the Non-Baby Boomers (NBB) population is 21% (945/4545) vs 14% (1152/8476) for baby boomers (BB). More than 1 out of 3 (37% or 345/945) of sero-positives NBB indicated injection drug use (IDU). (Of these, 72% (246/345) indicated IDU within the last 12 months at testing). Viremic patients with known IDU status in the NBB cohort had higher odds of being linked to care but lowest odds of being treated. 95% (240/252 IDU NBB) vs 75% (460/613 BB). Odds ratio 6.65 95 % CI: 3.62 to 12.22; p <0.0001. Comparing the NBB IDU patients vs all linked to care, 13% (32/240) vs 23%(230/996) were treated respectively. Odds ratio 0.51 95 % CI: 0.34 to 0.76; p=0.0013.

Conclusion and next steps: Partners with co-located treaters greatly enhanced linkage to care rates. The majority of IDU patients linked to care are being warehoused. IDU patients encounter significant challenges, including failure to attend appointment for HCV staging, declining treatment, being warehoused (due to HCV treater access, failing drug screens, etc). Even with restrictive access and insurance constraints, cure is attainable as demonstrated by our program. Further strategic action is needed to increase treatment for the confirmed PWID pool of HCV infected patients.

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