Working Towards HCV Eradication In Far North Queensland

Treatment of 640 patients in 15 months through a decentralised model of care

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A Patient Focused, Decentralised Model of Care

Empowerment of prescribers who treat…

- Communities, such as Primary Health Care Providers
- People in prison & People who use drugs
- People with sexually transmitted diseases & HIV
- People with addictions – alcohol, tobacco & other drugs
- Aboriginal & Torres Strait Islander communities

Service adaptation

- Nurse practitioners & clinical nurses
- Outreach services to deliver treatment to remote communities
Results

- February 2016 – April 2017 (15 months)
- Cairns Hinterland Hospital & Health Service
- 640 patients
  - Complete data – 553 patients (86.4%)
  - Lost to follow up – 64 patients (10%)
  - Results pending – 23 patients (3.6%)

Results – DAA Regimen Prescribed

![Pie chart showing distribution of DAA regimens prescribed](chart.png)

Figure 5: Distribution of DAA regimens prescribed during March to September 2016 in Australia

The Kirby Institute. Monitoring hepatitis C treatment uptake in Australia (issue 6). The Kirby Institute, UNSW Sydney, February 2017
The Kirby Institute. Monitoring hepatitis C treatment uptake in Australia (issue 6). The Kirby Institute, UNSW Sydney, February 2017
SVR 12 Rates

<table>
<thead>
<tr>
<th></th>
<th>Overall</th>
<th>Non-Cirrhotic</th>
<th>Cirrhotic</th>
<th>Treatment Naïve</th>
<th>Treatment Experienced</th>
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<tbody>
<tr>
<td></td>
<td>96.0%</td>
<td>96.7%</td>
<td>93.8%</td>
<td>97.2%</td>
<td>91.0%</td>
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- Cirrhosis (23.3%, n=149) \(p=0.13\)
- Rx experience (15.9%, n=102) \(p=0\leq 0.01\)

Take Home Points

- Regional areas can safely treat a large volume of patients in a short period of time with outcomes equivalent to clinical trials
- Achievable with minimal extra resources
- Diverse range of prescribers in various settings
- Patient centred focus