COMMUNITY BASED PEER FACILITATED HEPATITIS C POINT OF CARE TESTING PROJECT DUBLIN

McHugh T¹, O Neill D¹, Farrell J¹, O Connor E¹ & Lambert JS^{1,2}

- 1. Infectious Diseases Department, Mater Misericordiae University Hospital, Dublin, Ireland
- 2. UCD School of Medicine, Dublin, Ireland

Background: This peer led intervention, aims to overcome barriers to treatment by offering testing and a gateway to treatment across community-based projects. At screening events, attendees are offered up to date information with respect to the transmission, testing and treatment of the Hepatitis C Virus (HCV) and a direct and clear route to treatment. Point of care testing was offered to vulnerable groups which are frequently marginalized with respect to health service engagement. Screening was conducted in six addiction and harm reduction services between October to December 2019.

Description of model of care/intervention: A Point of Care (POC) HCV A/b testing (OraQuick HCV Rapid Antibody Test) was offered to individuals who at the time of screening were unaware of their HCV status. For those who tested HCV A/b positive, hospital follow up appointment dates/times were offered within 2 weeks of initial testing. The screening intervention was carried out by a HCV Peer Support Worker from the Mater Misericordiae University Hospital (MMUH) Infectious Disease Service.

Effectiveness: A total of 90 individuals were screened, 12.2 % (n=11) tested HCV antibody positive. To date 63.6% (n=7) individuals have attended a specialist appointment for HCV treatment assessment. Thus far one of the individuals identified during the screening intervention has commenced DAA treatment.

Conclusion and next steps: Community based peer facilitated screening intervention can enhance HCV diagnosis for at risk populations but referrals to/ attendance at secondary care remains a challenge for this cohort, emphasizing the need for peer support involvement. This data highlights the potential for developing interventions to enhance engagement with HCV screening and entry to the cascade of care required to cure HCV.

Conflict of Interest Statement: Dr John S Lambert has received unrestricted grants from the Pharmaceutical Industry to support his research work.