

## **SUCCESSFUL TREATMENT OF HEPATITIS C IN A DEDICATED HOMELESS GP PRACTICE USING A MULTIDISCIPLINARY APPROACH**

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### **Background:**

Prevalence of Hepatitis C Virus (HCV) in the homeless population has been estimated at up to 40%. With availability of Direct Acting Antivirals (DAA), HCV is an easily curable disease. Homelessness is associated with high morbidity and mortality with polypharmacy and polysubstance misuse. The homeless population are less likely to engage with traditional hospital based HCV treatment services, with socio-economic and environmental factors contributing to medicines non-adherence.

### **Approach:**

NHS Lothian runs an HCV outreach treatment service at a dedicated general practice for the homeless. This model is overseen by a Hepatology Consultant and utilises a multidisciplinary team (MDT) approach. Treatment is led by a Hepatology Nurse Practitioner from secondary care working on site alongside practice based GP, support worker and community psychiatric nurses. HCV medicines are supplied via community pharmacy often on daily observed basis, linked into opioid substitution treatment where relevant. A clinical pharmacist advises on Drug Drug Interactions and liaises with community pharmacy. Sustained Viral Response (SVR) was measured 12 weeks (SVR 12) or more after cessation of treatment.

### **Outcome:**

From October 2016 – May 2018, DAA based treatment was commenced in 49 patients. Currently, SVR 12 is available on 22 patients. Of these 19 achieved SVR (86%). The remaining patients (n=27) await SVR 12 over the forthcoming months.

### **Conclusion:**

Despite perceived barriers to treatment in the homeless population, our data demonstrates successful HCV treatment can be delivered in outreach settings with proactive support of the MDT. An opportunistic and flexible approach is key in engaging this vulnerable population to improve health outcomes and to reduce the pool of infection.

### **Disclosure of Interest Statement:**

*The authors confirm they have no conflict of interest and have received no contribution for this work financial or otherwise.*