

## **Hepatitis C Testing and Treatment services through a One –Stop Model service delivery for People who Inject Drugs (PWID) in urban Colombo, Sri Lanka**

### **Authors:**

Herath S<sup>1</sup>, De Silva S<sup>1</sup>, Elayan S<sup>1</sup>, Wijesinghe I<sup>1</sup>, Gunasekara L<sup>2</sup>, Atthanayake D<sup>1</sup>, Weerasooriya A<sup>1</sup>

<sup>1</sup> National STD/AIDS Control Program, <sup>2</sup>Asia Lanka Social Development Cooperation

**Background:** Viral hepatitis prevalence, both Hepatitis C (HCV) & B (HBV) among the general population is negligible, the prevalence is closing 40% among people who inject drugs (PWID) in Sri Lanka primarily focusing the high urban capital Colombo.

Though, evidence based harm reduction and hepatitis C testing & treatment services were discussed since many years past, services were implemented only in 2022.

In this context, a Community Based approach was initiated as a “One Stop Model” in a high urban location where PWID live in concentration.

Sri Lanka record initiation of PWID specific harm reduction services for the first time in the history through this approach.

**Description of model of care/intervention:** The National STD/AIDS Control program provides services through a community based location. The present community center location is provided by a religious entity free of any charges for location and utility bills.

Services routinely provided under one roof are; education, safer drug use, needle safe program, Needle Syringe Exchange Services (NSES), testing for HIV, HCV, HBV, & syphilis using Point of Care testing, Counseling, treatment and follow up for HCV, .family & community educational programs for harm reduction & HCV treatment, escorting most difficult to manage HCV & HBV cases to hospitals and referral services to other facilities.

**Effectiveness:** Hepatitis C treatment program was initiated in July 2022. In this ongoing program, as of end February 2023, there were 134 PWID tested for Hepatitis C Viral Load, of them 108 were identified as eligible for treatment. Treatment was initiated among 84 and 34 successfully completed the course of treatment. Further, yield for other interventions were high through this model.

**Conclusion and next steps:** This ongoing intervention show cases a “One Stop Model” is very effective to provide services to PWID. Therefore, strengthening this model is important. In addition, reaching the community through mobile units is planned in the future.

**Disclosure of Interest Statement:** None