A MODEL OF CARE FOR PEOPLE ATTENDING DRUG TREATMENT CENTERS AIMING AT HEPATITIS C ELIMINATION BY 2022. A PART OF THE C- FREE SOUTH STRATEGY

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Background: As part of an elimination program for hepatitis C (HCV) in the Region of Southern Denmark (RSD), a model of care was developed to assure large scale testing and treatment of people who use drugs (PWUD) attending drug treatment centers (DTC). In Denmark HCV treatment has mainly been hospital based with low treatment coverage of PWUD. Aim of the elimination program is to attain the WHO goal of 90% diagnosed and 80% treated of PWUD attending DTC within 2022.

Description of model of care/intervention: At a population level it is a "Test and Treat strategy" based on an existing model used at two DTC in RSD. The model provides the full cascade of care; test, blood work for treatment evaluation, assessment of liver fibrosis by Fibroscan®, consultation by infectious disease physician and HCV treatment at the DTC. When extended to the remaining 13 DTC in RSD; it will provide care for an estimated 3000 PWUD. The expected chronic HCV prevalence among opiate substitution recipients is 35%. By sequentially implementing the model over a 13 month period with an intensive test (two months) and subsequent treatment period (one month) at each center, risk of re-infection is likely reduced. A repeat test intervention will take place 12 month after the treatment to evaluate post intervention prevalence and incidence.

Effectiveness: The program commenced in March 2019 in the first center serving 168 clients of which 90 receive opioid substitution therapy. Among 35 diagnosed with HCV 23 initiated treatment during the treatment intervention. By September 2019 results from six centers will be available.

Conclusion and next steps: Preliminary results suggest that a large fraction of PWUD attending a DTC can be engaged in treatment. It remains to be proven if this sequential model can eliminate HCV both on diagnosis, prevalence and incidence targets.

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