THE HEPRIS STUDY - PREVALENCE OF HEPATITIS C IN NORWEGIAN PRISONS

Hauge J1,2, Kielland KB1, Jarnaess E2, Midgard H3,4, Dalgard O4,5

1Norwegian National Advisory Unit on Concurrent Substance Abuse and Mental Health Disorders  
2AbbVie, 3Oslo University Hospital, 4Akershus University Hospital, 5University of Oslo

Background:  
People incarcerated in prison are a recognized high-risk group for hepatitis C virus (HCV) infection. The primary aim was to assess the prevalence of HCV infection among people incarcerated in Norwegian prisons, with a special emphasis on people who inject drugs. Approval granted by Regional Committee for Medical and Health Research Ethics South-East Norway (2016/1189).

Methods:  
Newly incarcerated individuals in 6 prisons in a 12–18-month inclusion period in 2018-2019 were offered participation. Participants were tested for anti-HCV by rapid diagnostic test (HCV OraQuick®) and retested for anti-HCV and HCV RNA if positive.

Results:  
A total of 870 participants were included. Median age was 35 years (IQR 28-45), 10.3% (90/870) were female and 78.7% (685/870) were Norwegian citizens. Ever injecting drug use (IDU) was reported by 35.9% (312/870) and current/former opioid agonist treatment (OAT) by 12.4% (108/870). Prevalence of anti-HCV was 19.7% (171/870) and of HCV RNA 9.3% (81/870), hence 47.3% ever exposed to HCV had chronic HCV infection. Anti-HCV positivity was 14.6% (62/425) among participants < 35 years and 24.5% (109/445) ≥ 35 years (p<0.001), 36.7% (33/90) in females and 17.7% (138/780) in males (p<0.001), 23.4% (160/685) in Norwegian citizens and 6.0% (11/184) in foreigners (p<0.001). Participants reporting IDU had 53.5% (167/312) anti-HCV positivity, compared to 0.5% (3/553) in participants not reporting IDU (p<0.001). Anti-HCV positivity was 80.6% (87/108) in participants ever in OAT and 10.9% (83/759) in never in OAT (<0.001), but 39.2% (80/204) of participants with IDU and never in OAT, were anti-HCV positive.

Conclusion:  
People incarcerated in Norwegian prisons have a high prevalence of anti-HCV, and nearly half of the study participants exposed had a chronic infection. Further analysis of association with risk factors for infection and treatment uptake will contribute to determining the future role of prisons in the elimination of HCV in Norway.

Disclosure of Interest Statement:  
This collaborative study was sponsored by AbbVie, contributing to the design, participating in collection, analysis and interpretation of data, and in writing, reviewing and approval of the final version. Hauge is an industry-sector Ph.D.-student funded by AbbVie and the Norwegian Research Council. Jarnaess is an employee of AbbVie and a shareholder of AbbVie stocks. Midgard has received advisory board fees and lecture fees from Gilead, Abbvie, and MSD. Dalgard and Kielland have no disclosures.