# HEALTH-ECONOMIC EVALUATION OF A FAST-TRACK HEPATITIS C MICRO-ELIMINATION PROGRAM AMONG PEOPLE WHO INJECT DRUGS RECEIVING OST IN THE HELLENIC ORGANIZATION AGAINST DRUGS (TITYUS PROGRAM).

<u>Ilias Gountas</u><sup>1</sup>, Olga Anagnostou<sup>2</sup>, Eleftheria Petroulaki<sup>2</sup>, Konstantinos Kokkolis<sup>2</sup>, Athanasios Dimitriadis<sup>2</sup>, Christos Tsoulas<sup>1,3</sup>, Athanasios Theocharis<sup>2</sup>, Spilios Manolakopoulos<sup>1,4</sup>

# **Background:**

The goal of hepatitis C virus (HCV) elimination by 2030 can be best achieved through implementing microelimination strategies. The Organization Against Drugs (OKANA) is the sole provider of oral substitution therapy (OST) in Greece with 7,830 beneficiaries with 65% anti-HCV prevalence. Tityus is a fast-track 1-year national HCV microelimination program in OKANA OST Units. We present a health-economic evaluation of Tityus compared to OKANA standard of care (SOC) and to a counterfactual scenario where treatment uptake would be similar to the general population (GP).

#### Methods:

A stochastic, HCV transmission and disease progression model among PWID, was calibrated to the OKANA cohort. Medical cost data were retrieved from a previous cost-effectiveness study (Gountas, WJG2019). Health benefits were measured in terms of prevented cases of cirrhosis, hepatocellular carcinoma (HCC), and liver-related deaths. Tityus is expected to treat all 2,959 estimated Chronic HCV PWID in 1 year compared to SOC: 405/year and GP:130/year. The sustained virologic response rate of SOC and GP was 90%, and 95% for Tityus reflecting more intense follow-up and higher adherence.

### **Results:**

HCV microelimination can be achieved by 2022 for Tityus, 2028 for SOC and 2045 for GP. During 2021–2028 Tityus is expected to prevent 180 cirrhosis (95% Credible intervals (95% Crl): 142, 227), 82 HCC (95% Crl: 55, 115) and 26 liver-related deaths (95% Crl:5, 37) compared to SOC and 300 (95% Crl: 255, 360), 124 (95% Crl:95, 160) and 35 (95% Crl:12, 50) respective cases compared to GP. Tityus compared to SOC leads to estimated savings of €8M (treatment: €1.5M, medical costs: €6.5M).

# **Conclusion:**

Tityus program can shorten time to HCV microelimination in OKANA by 6 years compared to SOC and supports National HCV Elimination goals. Tityus is cost-saving (€8M) compared to SOC mainly due to the prevention of life threating and costly HCV complications.

## Disclosure of Interest Statement: See example below:

This study was supported through a research grant from Gilead Sciences.

<sup>&</sup>lt;sup>1</sup>Medical School, National and Kapodistrian University of Athens, Athens, Greece;

<sup>&</sup>lt;sup>2</sup>Greek Organization Against Drugs, OKANA;

<sup>&</sup>lt;sup>3</sup>Gilead Sciences Hellas;

<sup>&</sup>lt;sup>4</sup> Liver-GI Unit, 2nd Academic Department of Internal Medicine, Hippocration General Hospital, National and Kapodistrian University of Athens, Athens, Greece.