

INTEGRATED HEALTHCARE SERVICES FOR PEOPLE WHO USE DRUGS AND ALCOHOL FOLLOWED AT THE HEP C VIRTUAL CLINIC FROM LAUSANNE, SWITZERLAND

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Background:

In Switzerland DAA treatment is guaranteed by universal healthcare insurance and can be prescribed by all registered medical doctors. This independently of public or private source of healthcare provider.

However, one major challenge to achieve HCV elimination today is finding undiagnosed and untreated people with HCV infection.

Description of model of care/intervention:

Our private practice is home for the Hepatitis C Virtual Clinic (HCVC) initiative. It provides support as needed to the network for viral hepatitis diagnose, follow-up and/or DAA treatment within an addiction medicine approach. The main referral partners are general practitioners, addiction medicine services and sexual health centers. Undergraduate medical students contribute to data analysis.

Effectiveness:

Between 2019 and 2022 we followed 70 patients for OAT=36 (51%), chemsex use=20 (29%) or alcohol use disorder =14 (20%).

The OAT group was 52± 8 years old, men=73%, HIV+= 33%, HCV+=78%, HBV+=17%, and liver fibrosis F3/F4=36%. Patients with detectable_HCV_RNA=12 of which 9 received DAA therapy (75%) and achieved SVR-12 (100%) during follow-up. Late HCV presenters (LP) represented 67% of detectable_HCV-RNA patients, hepatocellular carcinoma (HCC) was present in 80% of LP with 1 fatal case.

The chemsex users' group were 40± 7 years old, MSM=100%, HIV+= 30%, HCV+=50%, HBV+=0%, and liver fibrosis F0-F2=100%. Patients with detectable_HCV_RNA=8 all received DAA therapy (100%) and achieved SVR-12 (100%) during follow-up. PrEP was prescribed in 45% of the group.

Patients with alcohol use disorder were 50± 9 years old, men=79%, HCV+=7%, HBV+=7% and liver fibrosis F3-4=21%. No positive screening was retained for HCV_RNA or HIV. HCC was detected in one patient (7%).

Conclusion and next steps:

Figure 1 shows the cascade of care for HCV and treatment outcomes.

Decentralized settings can provide integrated care for PWUD and alcohol as well as synergism opportunities with the local network.

In 2023 the HCVC will deliver on-site services in addiction medicine housing facilities based in canton Vaud.

Disclosure of Interest Statement: *See example below:*

The HCVC is co-sponsored by Gilead and the Loterie Romande with the promotion of the Fondation du Levant.

Figure 1

