

ADAPT THE SYSTEM, NOT THE PERSON: IMPROVING THE HCV CARE PATHWAYS BETWEEN THE DRUG CARE CENTRES AND THEIR REFERRAL HOSPITALS IN CATALONIA

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Background:

People who use drugs (PUD) have a high prevalence of hepatitis C virus (HCV) infection. Access to HCV diagnosis and treatment are often hampered by healthcare system procedures. Simplifying and making more accessible procedures and pathways could help to increase diagnosis and treatment uptake. The aim of this study was to protocolize activities and referral circuits between out-patient drug treatment centers (CAS) and their referral hospitals to: implement as many screen and health assessment actions as possible in the CAS premises and reduce the number of visits between diagnosis and treatment initiation.

Description of model of care/intervention:

Steps implemented:

- 1) A framework protocol was drawn up by experts under guidelines of the Catalan Health Department.
- 2) One nurse from each CAS was trained to become the HCV coordinator.
- 3) This protocol was presented to regional health authorities and managers of CAS and hospitals of each region.
- 4) The protocol was adjusted to each CAS with its referral hospital.
- 5) A monitoring system was designed.

Effectiveness:

So far, 38 protocols were formalized. Between diagnosis and antiviral treatment dispensation: 2 patient visits were necessary in 6 (15%) protocols, 3 in 22 (58%), 4 in 7 (18%) and 5 in 3 (8%). A mean of 3,18 visits. In 8 (21%) protocols every intervention was done at the CAS premises. In 23 (60%) protocols, screening is done in the CAS by venipuncture or point-of-care testing. In 9 (23%) protocols, patients don't have to go to hospital. In 16 (42%) protocols, only once, in 8 (21%), twice and in 5 (13%), 3 times. The mean visits to hospital were 1,26.

Conclusion and next steps:

PUD, even active injectors, can be successfully treated if diagnosis and treatment is simplified and accessible. Efforts should be intensified to reduce the number of clinical visits and locate them at drug care centers.

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