

STRATEGIC CO-LOCALIZATION OF HCV TESTING WITH COVID-19 VACCINATION TO ENHANCE ENGAGEMENT AMONG PRIORITY POPULATIONS

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Background:

COVID-19 vaccine clinics are an opportunity to enhance HCV testing among priority populations, including those experiencing mental health issues and substance use. By leveraging existing resources and infrastructure, we sought to co-localize HCV screening in COVID-19 vaccine clinics in Ontario (ON), Canada.

Methods:

Vaccine recipients (VRs) were staff, community, or patients at one of two sites: Centre for Addiction and Mental Health (CAMH) in Toronto, ON, and Ontario Addiction Treatment Centre (OATC) in North Bay, ON. HCV outreach workers approached VRs for the OraQuick fingerprick HCV antibody (Ab) point-of-care test (POCT) during or after post-vaccine observation. Results were given after 5 minutes, as this approach detects all viremic individuals (VIRCAN 5-Minute Rule). Dried blood spot (DBS) fingerprick samples were collected for RNA testing following Ab+ results.

Results:

CAMH: 6696 individuals received vaccine over 23 days (mean 281/day, range 102-488). 1288 (19%) underwent POCT (mean 56/day, range 16-106). Mean age was 47 years (range 12-87) and 594 (46%) were male. Staff constituted 26%, with 1 Ab+ (0.2%) compared to 15 (1.6%) among patients/community members. DBS were collected from 12 individuals, 4 were RNA+; one has started treatment. OATC: 150 individuals received vaccine over 9 days (mean 17/day, range 11-33). 27 (18%) were recruited for POCT (mean 3/day, range 0-10). Mean age was 37 years (range 25-56) and 14 (52%) were male. Seven individuals were known Ab+, DBS were collected from each. 4 were RNA+; one started treatment. Outreach and linkage to care is ongoing.

Conclusion:

With the high rates of COVID-19 vaccination in ON, HCV testing with vaccination enables reaching populations that may not otherwise seek healthcare. The VIRCAN 5-Minute Rule for POCT, followed by DBS in this setting, is a quick but low-barrier approach to improve HCV case finding among the undiagnosed or those not yet linked to care.

Disclosure of Interest Statement:

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