

A GUIDE TO SCALE-UP OF TESTING AND TREATMENT FOR HEPATITIS C IN THE PRISON SETTING: THE STOP-C IMPLEMENTATION TOOLKIT

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Background:

To achieve hepatitis C (HCV) elimination, scale-up of HCV testing and treatment in prisons is key due to high HCV prevalence (15% globally), ongoing transmission, and low treatment rates. The Surveillance and Treatment of Prisoners with Hepatitis C (SToP-C) project assessed the feasibility and efficacy of scale-up of HCV direct acting antiviral (DAA) treatment as prevention (TasP) in four Australian correctional centres. To facilitate translation to other international settings, a web-based implementation toolkit has been developed.

Description of model of care/intervention:

The toolkit describes the processes involved in establishment and scale-up of HCV testing and treatment in prisons, including programs aiming for TasP. The toolkit is targeted at custodial health service planners and administrators, but also has relevance for policymakers, practitioners, and advocates. Steps in program planning, implementation, evaluation and dissemination are suggested across themes including resourcing, workforce, data requirements, communications, consumer engagement, special populations and stigma. Case studies with challenges and solutions are described. The toolkit will be available via a publicly accessible website (www.stopc.org). Supplementary resources include HCV clinical management proformas and educational materials.

Effectiveness:

From October 2014 to December 2019 (pre-treatment scale-up surveillance: 31 months; treatment-scale-up: 32 months), 3692 people were enrolled and tested, representing a mean coverage of 71%. In total 10,882 HCV follow-up tests were completed (≥ 1 in 1719 people, mean of 231 tests/month). DAA treatment was initiated in 324/397 (81%) RNA+ participants. Rapid scale-up of DAA therapy was associated with a significant HCV incidence reduction, indicative of TasP.

Conclusion and next steps:

The custodial environment presents myriad challenges impeding establishment of a HCV TasP program. With a TasP evidence base from SToP-C, the toolkit provides an accessible guideline for scale-up of DAA therapy in prisons. Mathematical modelling and cost-effectiveness evaluation are underway to inform optimal level of scale-up and potential epidemiological impact.

Disclosure of Interest Statement:

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