07.00 F	Public Health and Epidemiology Registration Level 8									
08.30 - 09:00 F	Opening Ceremony Room: Montreal Ballroom, Level 11 Chairs: Julie Bruneau, Marina Klein, and Jason Grebely									
08.45 - 08.50	Welcome to the Conference Community Opening Awards									
09.00 - 10.45 S	Session A: Public Health and Epidemiology Room: Montreal Ballroom, Level 11									
L	Chairs: Margaret Hellard and Matthew Hickman The changing landscape of drug use globally: Implications for hepatitis C elimination Louisa Degenhardt, UNSW Sydney, Australia									
09.25 - 09.45 N 09.45 - 10.00	Questions & Discussion Global progress towards hepatitis C elimination: success and challenges Margaret Hellard, Burnet Institute, Australia The Scottish Experience: Reduction in the Population Prevalence of Chronic HCV among People Who Inject Drugs Associated with Major Scale-Up of Direct-Acting Antiviral Therapy in Community Drug Services: Real World Data									
10.00 - 10.10 1	Norah Palmateer, Glasgow Caledonian University, Glasgow The Georgian experience. Not just cure. The broader benefits of providing hepatitis Maia Butsashvilli, Health Research Union, Georgia	C treatment in ne	eedle and syringe programs services							
5	Sigurdur Olafsson, Landspitali University Hospital, Iceland	ether government	nt, hepatology, infectious diseases, drug and alcohol services and the prison sector to engage with people who inject drugs in hepatitis C care							
10.30 - 10.45 L	Questions & Discussion Life and loss in the race to elimination: What does viral elimination potentiate and what does it leave behind? Kari Lancaster, Centre For Social Research In Health, UNSW, Australia Coffee Break and Poster Viewing									
11.15- 12.15	Level 8 Session B: Mathematical Modelling to Inform Practice and Policy Room: Montreal Ballroom, Level 11	_								
	Chairs: Tim Rhodes and Kari Lancaster How can mathematical modelling be used to better inform research, practice and po	licy in hepatitis C	C and drug user health?							
	Peter Vickerman, University of Bristol, United Kingdom Questions & Discussion Case Study 1									
11.55 - 12.05 C	Natasha Martin, University of California San Diego, United States Case Study 2									
12.05 - 12.15 (Homie Razavi, CDA Foundation, United States Case Study 3 John Dillon, University of Dundee, United Kingdom									
12.15 - 14.00 L L	Lunch & Poster Viewing Level 8									
	Industry Sponsored Symposium: Working Together toward HCV Elimination in Peop Room: Fortifications, Level 9 Session C: Progress towards hepatitis C elimination	le Who Use Subs	Session D: Ways to improve HCV testing, treatment and care 14.00 - 15.20 Session E: Models of care to enhance engagement in care							
F	Room: Montreal A & B, Level 11 Chairs: Philip Bruggmann and Adelina Artenie		Room: Montreal C & D, Level 11 Room: Fortifications, Level 9 Chairs: Mel Krajden and Lise Lafferty Chairs: Marie-ève Goyer and Martin Kåberg							
p	High uptake of direct-acting antiviral therapy for hepatitis C virus and reduction in population-level viremic prevalence: Progress toward achieving hepatitis C elimination among people who inject drugs in Australia Heather Valerio, The Kirby Institute, UNSW Sydney, Australia	14.00 - 14.15	Task shifting in HCV testing and research: improving knowledge of HCV status through a peer outreach hepatitis c point of care project in Toronto, Canada Jennifer Broad. South Riverdale Community Health Centre. Canada 14.00 - 14.15 The Kombi Clinic – It's the end of the road for Hepatitis C Mary O'Flynn, Kombi Clinic, Australia							
14 15 - 14.30 F	Recent opioid agonist therapy and hepatitis C virus treatment uptake among people who inject drugs with chronic hepatitis C infection in a population based data linkage study	14 15 - 14.30	Maximising adherence to direct-acting antivirals among street-based and marginalised clients: The results of daily dosing 14 15 - 14.30 Effective DAA HCV Treatment and Care Model Among People Who Inject Drugs in Most Hard-to-Reach Conflict Areas in Northern Myanmar							
14.30 - 14.45 /	Sofia Bartlett, BC Centre For Disease Control, Canada An intervention to improve HCV testing, linkage to care, and treatment among	14.30 - 14.45	Phillip Read, Kirketon Road Centre, Australia Changes in attitudes, knowledge and everyday life throughout direct-acting antiviral treatment for hepatitis c: a longitudinal gualitative study Su Su Aung, Asian Harm Reduction Network, Myanmar Addressing the HCV cascade of care in vulnerable populations with poor access to healthcare in Madrid through of a point of care in a one step							
Ν	people who use drugs in Tehran, Iran: The ENHANCE study Maryam Alavi, The Kirby Institute, UNSW Sydney, Australia The evolving hepatitis C care cascade in a real-world setting: results for the period	14.45 - 14.50	antiviral treatment for hepatitis c: a longitudinal qualitative study Stelliana Goutzamanis, Burnet Institute, Australia Factors that influence people who use drugs' experiences with direct-acting Madrid through of a point of care in a one step Jorge Valencia, Harm reduction Unit "SMASD"; Subdirección General de Adicciones, Spain 14.45 - 14.50 National Prisons Hepatitis Network - Facilitating enhanced infrastructure and scale-up of HCV							
(2003-2017 from Free Clinic Antwerp Catharina Matheï, Free Clinc Antwerp, Belgium Early impact of direct-acting antivirals on chronic hepatitis C prevalence among	14.50 - 14.55	antiviral treatment for hepatitis c: a qualitative study in Vancouver. Canada Rod Knight, National Prisons Hepatitis Network, Australia Dispensing mode and hepatitis c direct acting antiviral treatment completion 14.50 - 14.55 Treatment in Australian prisons: towards national elimination Yumi Sheehan, National Prisons Hepatitis Network, Australia Police are responsive to hepatitis C prevention: Police sensitization with a hepatitis C entry have							
l.	people who inject drugs in England: Real world data, 2011-2017 Megan Bardsley, Public Health England, United Kingdom		John Koo, Vancouver Coastal Health, Canada proven to be more effective in Nairobi. Kenva Wangari Kimemia, Medecins Du Monde, Kenya							
	Opportunities for engaging patients in care along the hepatitis C cascade of care Alisa Pedrana, Burnet Institute, Australia	14.55 - 15.00	HCV support groups: do they still have a role in the DAA era? 14.55 - 15.00 Establishing an Integrated Care Clinic for HCV-infected People Who Actively Inject Drugs (PWID) a Harm Reduction Center in Washington, DC (ANCHOR Model) Rachel Silk, University Of Maryland, United States							
15.00 - 15.05 t	A one-stop community-based approach for HCV screening, diagnosis and treatment among people who inject drugs in Iran: The Rostam study	15.00 - 15.05	Peers4wellness: indigenous model for supportive HCV and HIV care 15.00 - 15.05 Hepatitis C treatment integration with harm reduction services in Georgia: Preliminary findings							
15.05 - 15.10 [Samira Hosseini Hooshyar, The Kirby Institute, UNSW Sydney, Australia Decreasing hepatitis C incidence and prevalence through enhancing HCV care and treatment among HIV co-infected individuals: The CO-EC study outcomes	15.05 - 15.10	Sadeem Fayed, Simon Fraser University, Canada A two-eyed seeing approach to wholistic healing and wellness for people with drug use experience Maia Butsashvili, Health Research Union, Georgia Good practices in health response to HCV in a harm reduction program							
J 15.10 - 15.15 E	Joseph Doyle, Burnet Institute, Australia Engaging drug using communities to scale up diagnosis and inform national HIV/HCV elimination efforts	15.10 - 15.15	Matthew Fischer, Indigenous Wellness Research Group, Canada Cláudia Pereira, Ares Do Pinhal, Portugal Enhanced self-efficacy for HCV management among people participating an HCV education program focused on drug and alcohol and primary care settings Cláudia Pereira, Ares Do Pinhal, Portugal Partnering with consumers: The development of a primary health care hepatitis C treatment mode within a peer-based needle and syringe program							
ľ	nivnev elimination enorts		Nikitah Habraken, Australasian Society for HIV, Viral Hepatitis and Sexual Health John Lockwood, Kirketon Road Centre, Australia							
1	Annette Gaudino, Treatment Action Group, United States	15.15 - 15.20	Medicine, Australia Accessible care intervention for engaging people who inject illicit drugs in hepatitis C virus care: preliminary results from a randomized clinical trial Medicine, Australia 15.15 - 15.20 A community-based approach to viral hepatitis in central Appalachia A community-based approach to viral hepatitis in central Appalachia							
15.20 - 16.15	Coffee Break & Poster Tour		Benjamin Eckhardt, New York University School Of Medicine, United States Jane Crowe, Knox Country Health Department, United States							
15.30 - 16.00 F	Poster Tour 1: Social Science Chair: Lise Lafferty	15.30 - 16.00	Poster Tour 2: Epidemiology & Public Health Chair:							
li I	Beyond Clinical Outcomes: Impact and Wider Social and Healthcare System Implications of Hepatitis C Virus (HCV) Treatment and Cure Darcy Bowman, Gilead Sciences, United Kingdom	15.30 - 15.35	Inconsistencies in Methodology, Reporting, and Subjective Description of Hepatitis C Virus Reinfection Rates Among People Who Inject Drugs: Potential Contribution to Stigma and Discrimination Sofia Bartlett. BC Centre for Disease Control. Canada							
t	Hepatitis C Treatment: Peer Insights to Understanding Enablers and Impediments to DAA Uptake Among People Who Inject Drugs Susan Chong, La Trobe University, Australia	15.35 - 15.40								
15.40 - 15.45 F	Crisis Among Russian-Speaking Injecting Drug Users in France: The Urgent dto Improve Access to Care and Social Integration e Jauffret-Roustide, INSERM, France The Urgent of Language Injecting Drug Users in France: The Urgent Organi									
	ctors Associated with Low Rates of Engagement in Opioid Substitution eatment Among People Who Use Drugs in Athens orge Kalamitsis, Hellenic Liver Patient Association, Greece 15.45 - 15.50 What is the optimal HCV elimination strategy among PWID in a middle-income, high burden setting? A modeling and economic analysis in Tijuana, Mexico Lara Marquez, University of California San Diego, United States									
li I	The Implementation of Harm Reduction and Hepatitis C Services for People Who Inject Drugs in Europe: Results from the 2018 Hep-Core Survey Adam Palayew, McGill University, Canada	nplementation of Harm Reduction and Hepatitis C Services for People Who 15.50 - 15.55 Community-Based Point-of-Care Testing and Treatment for People Who Inject Drugs in Myanmar Drugs in Europe: Results from the 2018 Hep-Core Survey								
15.55 - 16.00	Cost of Hepatitis C Care Facilitation For HIV/Hepatitis C Co-Infected People Who Use Substances	15.55 - 16.00	Willingness to Access Community-Based Hepatitis C and HIV Testing Centres Among Injecting Drug Users in Lagos Nigeria							
16.15 - 17.45	Bruce Schackman, Weill Cornell Medicine, United States Session F: Prevention of Hepatitis C Boom: Montreel A & B. Level 44	16.15 - 17.45	Olanrewaju Onigbogi, University of Eastern Finland, Finland Session G: Decolonizing hepatitis C treatment and research: Innovative approaches by and with Indigenous people Boom: Montreel C & D. Level 14							
16.15 - 16.35 F	Room: Montreal A & B, Level 11 Chairs: Natasha Martin and Niklas Luhmann Hepatitis C reinfection among people who inject drugs: Should we worry?	16.15 - 16.20	Room: Montreal C & D, Level 11 Chairs: Alexandra King and Renée Masching Territorial Acknowledgement /Welcome to Territory Room: Fortifications, Level 9 Chairs: Melisa Dickie and Mary Ellen Harrod Structural barriers in the delivery of services for people who use drugs							
1	Havard Midgard, Oslo University Hospital, Norway	16.20 - 16.25	Opening Blessing Elder Sharon Jinkerson Brass, Key First Nation, Canada & Sadeem Fayed, Indigenous Jose Queiroz, APDES, Portugal							
ľ	€ y · y	16.25 - 16.35	Wellness Research Group, Canada Overview							
r	Opportunities and challenges for harm reduction and HCV prevention among people who use drugs: South African reflections	16.35 - 16.55	Alexandra King, University of Saskatchewan, Canada & Renée Masching, Canadian Aboriginal AIDS Network, Canada Developing new pathways of care in addiction services; a partnership between Onentokon Healing Lodge and the Centre hospitalier de l'Université de Montréal							
	Andrew Scheibe, TB HIV Care, South Africa What does the future hold for a hepatitis C vaccine?	16.55 - 17.15	Arlette Ven Den Hende, Onentokon Healing Lodge, Canada & Stéphanie Marsan, Centre hospitalier de l'Université de Montréal, Canada Dried blood spots and disruptive innovation: Empowerment of Indigenous Jennifer Broad, South Riverdale Community Health Centre, Canada How can knowledge translation be used to enhance the uptake of interventions in marginalized							
	Naglaa Shoukry, Université de Montréal, Canada		communities to address the colonial etiology of hepatitis C Anne Beck, Kitchenuhmaykoosib Inninuwug (Big Trout) First Nation, Canada & John Kim, National Laboratory for HIV Reference Services, Public Health Agency of Canada,							
7.15 - 17.45	Questions & Discussion	17.15 - 17.35	Canada Healing through research: Indigenous research methodologies in the substance use and hepatitis C space Elder Sharon Jinkerson Brass, Key First Nation, Canada & Sadeem Fayed, Indigenous 17.15 - 17.45 Questions & Discussion							
		17.35 - 17.45	Wellness Research Group, Canada Questions & Discussion							
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y 2 HCV Diagnosis, Linkage to Care and Treatment										
.30 Registration .00 - 08.45 Industry Sponsored Symposium: A step closer to achieving HCV elimination in substance	users									
Room: Fortifications, Level 9 .00 - 10.45 Session I: Moving from clinical trials to the real-world Room: Montreal Ballroom, Level 11										
Chairs: Shruti Mehta and Gregory Dore Overcoming barriers to integrating hepatitis C testing, linkage to care and treatment into 6	existing services	: success stories from low and middle income countries								
Sunil Solomon, Johns Hopkins University, United States 20 - 09:40 Moving from clinical trials to the real world: Effectiveness research for hepatitis c	Sunil Solomon, Johns Hopkins University, United States									
	Lisa R. Metsch, Columbia University, United States Skype Presentation: Supporting enhanced efforts to address hepatitis C and health for people who use drugs through strong government leadership									
00 - 10.15 Questions & Discussion 15 - 10.30 Australia will need to increase testing to achieve hepatitis C elimination										
Nick Scott, Burnet Institute, Australia Barriers and facilitators to engaging in HCV management and DAA therapy among general	l practitioners ar	nd drug and alcohol specialists - The practitioner experience								
Alison Marshall, The Kirby Institute, UNSW Sydney, Australia Coffee Break & Poster Viewing										
Level 8 5 - 12.15 Session K: Hepatitis C risk and prevention	11.15 - 12.15	Session L: Enhancing hepatitis C testing and linkage to care	11.15 - 12.15	Sesson J Workshop 1: Peers facilitating access to their criminalized	11.15 - 12.15 Session J Workshop 2: From the Frotline: A networking session					
	11110		11110 12110	communities improving the hep c cascade of care: How to meaningfully engage and involve people with lived experience (PWLE) in your programs						
Room: Montreal A & B, Level 11 Chairs: Hannah Fraser and Behzad Hajarizadeh		Room: Montreal C & D, Level 11 Chairs: Valerie Martel-Laferriere and Joshua Barocas		Room: Fortifications, Level 9 Chairs: Jennifer Broad & Jude Byrne	Room: Ville-Marie, Level 9 Chairs: John Dillon					
5 - 11.30 Association between short-term housing patterns and hepatitis c acquisition: findings from a cohort of people who inject drugs in Montréal, Canada	11.15 - 11.30	Making Oraquick quicker: A hepatitis C point-of-care test reduced to five minutes for viremic individuals			This session will provide an opportunity to meet, network and collaborate with other service providers, program planners, community members and researchers who have a focus on front-line services and					
Emmanuel Fortier, CHUM Research Centre, Canada 1 - 11.45 Diversity of detention patterns among people who inject drugs and the associated risk	11.30 - 11.45	Aaron Vanderhoff, Viral Hepatitis Care Network, Canada Time to detection of hepatitis C virus infection with the Xpert HCV Viral Load finger-			programs. You'll engage in facilitated discussions on approaches in four settings: prisons, harm reduction a needle-syringe programs, addiction medicine and opioid substitution therapy, and mobile and community-					
with incident hepatitis c virus (HCV) infection: Implications for HCV prevention Andreea Adelina Artenie, University Of Montréal, Canada		stick point-of-care assay: Facilitating a more rapid time to diagnosis Jason Grebely, The Kirby Institute, UNSW Sydney, Australia			based.					
5 - 12.00 Modelling the impact of prevention and treatment interventions for people who inject drugs in Dar es Salaam, Tanzania	11.45 - 12.00	Targeted testing pathways improve hepatitis C diagnosis rates			This session is presented by INHSU and CATIE. CATIE is Canada's source for HIV and hepatitis C informati					
Hannah Fraser, University of Bristol, United Kingdom 0 - 12.05 HIV and HCV among people who inject drugs in Ukraine: a stabilization or a calm before	12.00 - 12.05	Emma Robinson, University Of Dundee, United Kingdom Cost-effectiveness of hepatitis c virus screening and treatment with direct-acting	1							
the storm? Marina Kornilova, Alliance For Public Health, Ukraine		antivirals in people who inject drugs in Nairobi, Kenya Jack Stone, University Of Bristol, United Kingdom								
5 - 12.10 HCV among people who inject drugs in France: Acting on risk environment in an evolving crisis	12.05 - 12.10	The cost-effectiveness of an HCV outreach intervention for at-risk populations in London, UK								
Marie Jauffret-Roustide, Inserm, France 1 - 12.15 The Brazilian syndemics of crack use, HIV and HCV	12.10 - 12.15	Zoe Ward, University Of Bristol, United Kingdom Using a systems-thinking approach to elucidate programme theory underpinning the	1							
Alexandra Almeida, SDSU, United States 5 - 14.00 Lunch and Poster Viewing		effectiveness of Superdot-C: a pharmacy-led test and treat pathway for PWIDS with Andrew Radley, NHS Tayside, United Kingdom								
I evel 8 - 13.45 Industry Sponsored Symposium: Transforming HCV care: the power of collaboration										
Room: Fortifications, Level 9 - 15.00 Session M: Hepatitis prevention, treatment, and care in prisons	14.00 - 15.00	Session N: Enhancing hepatitis C treatment	14.00 - 15.00	Session O: Models of care: targeted interventions in various settings	14.00 - 15.00 Session: Peer-based models of care: Learning from our communities					
Room: Montreal A & B, Level 11		Room: Montreal C & D, Level 11		Room: Fortifications, Level 9	Room: Ville-Marie, Level 9					
Chairs: Andrew Lloyd and Lisa Barrett - 14.15 The hepatitis c virus (HCV) cascade of care in the New York City (NYC) jail system	14.00 - 14.15	Chairs: Brian Conway and Anne Øvrehus Nurse-led, community-based hepatitis c treatment is feasible and effective among	14.00 - 14.15	Chairs: Alexandra King and Shashi Kapadia Approaches to providing hepatitis C viremia testing to people who inject	Chairs: Jude Byrne and Matthew Bonn 14.00 - 14.15 Peer-led approach on treatment of Hepatitis C					
		people who inject drugs and their injecting network: the HCV treatment and prevention (TAP) study		drugs in Georgia, Head Start (Hepatitis Elimination Through Access to Diagnostics) Georgia						
Justin Chan, Correctional Health Services, NYC Health + Hospitals, United States - 14.30 Injecting culture following prison-wide hepatitis C treatment scale-up: negotiating risk after cure	14.15 - 14.30	Joseph Doyle, Burnet Institute, Australia Comparing trial designs for HCV treatment as prevention: An empirical evaluation	14.15 - 14.30	Maia Japaridze, FIND, Switzerland Increasing access to addiction services for Indigenous communities in Quebec: An integrated model of care between Onen'to:kon Healing Lodge,	Manasseh Muriithi, MDM-france, Kenya 14.15 - 14.30 A peer-based support-model for HCV treatment for PWID, integrated into a public healthcare facility in Hanoi, Vietnam					
Lise Lafferty, UNSW Sydney, Australia 1-14.45 Injecting culture following prison-wide hepatitis C treatment scale-up: negotiating risk	14.30 - 14.45	Natasha Martin, University Of California San Diego, United States Promise and pharmaceuticalisation in the era of direct-acting antivirals	14.30 - 14.45	Stephanie Marsan, Centre hospitalier de l'Université De Montréal, Canada Micro-elimination of Hepatitis C among people who use drugs in an	Mathilde Laval, Medecins Du Monde, France 14.30 - 14.45 The Hepatitis Bus – A Norwegian drug user initiative					
after cure Sophia Schroeder, Burnet Institute, Australia		Jake Rance, Centre For Social Research In Health, Australia		Indigenous community in Saskatchewan Canada Noreen Reed, Ahtahkakoop Health Clinic, Canada	Ronny Bjørnestad, proLAR Nett, Norway					
- 14.50 Perceived barriers to and facilitators of HCV treatment uptake in jail and linkage to HCV care after incarceration: a qualitative study	14.45 - 14.50	Real-world outcomes In Patients with Chronic Hepatitis C Virus Infection with Opioid Substitution Therapy, Mental Disorders, or Alcohol use Disorder Treated with Glecaprevir/Pibrentasvir: Data From The German Hepatitis C-Registry	14.45 - 14.50	Successful treatment of hepatitis c among people who inject drugs in Nairob Kenya	bi, 14.45 - 14.50 Community-based organization spearheads efforts to translate HCV interventions prison settings in Jakarta					
Matthew Akiyama, Montefiore Medical Center, United States		Stefan Christensen, CIM Münster, Germany		Gladys Ngwei, Medecins Du Monde, Kenya	Caroline Thomas, Koalisi Satu Hati, Indonesia					
- 14.55 Enhancing linkage to hepatitis C care upon release from Canadian provincial prisons: the population-level impact on hepatitis C transmission among people who inject drugs in Montréal	14.50 - 14.55	Real-world outcomes from people who use drugs with chronic hepatitis C virus infection treated with glecaprevir/pibrentasvir: A pooled analysis of post-marketing observational studies	14.50 - 14.55	Pharmacist-led HCV screening, diagnosis and treatment in an opioid substitution therapy outpatient pharmacy	14.50 - 14.55 Can patient groups lead diagnosis and treatment in prisons of resource limited settings? We are doing it!					
Arnaud Godin, McGill University, Canada 5 - 15.00 Disparities in Hepatitis C virus (HCV) care across Quebec's provincial prisons:	14.55 - 15.00	Juliette Foucher, Hopital de Haut Leveque, France Actively injecting PWID who use stimulants can be successfully treated for HCV	14.55 - 15.00	Colter Young, Shoppers Drug Mart, Canada Evaluation of the Xpert HCV Viral Load Fingerstick assay in the harm	Jean-Luc El Kaim, Coalition Plus, France 14.55 - 15.00 Methadone maintenance treatment program (MMTP) in Nepal: Role of user-led					
Implications for HCV micro-elimination		infection Sigurdur Olafsson, Landspitali University Hospital, Iceland		reduction setting in Catalonia, Spain	organizations in engaging and empowering MMTP patients					
Nadine Kronfli, McGill University, Canada	15.00 - 15.05	Glecaprevir/Pibrentasvir Achieves High SVR Rates Amongst People Who Use Drugs: Results from a Real World Cohort Stephen Barclay, NHS Greater Glasgow & Clyde, United Kingdom		Verónica Saludes, Germans Trias I Pujol University Hospital Research Institute (igtp), Spain	Ranjit Tiwari, National User Network of Nepal, Nepal					
- 15.45 Coffee Break and Poster Tour Level 8		The second of th								
- 15.40 Poster Tour 3: Clinical			15.10 - 15.40	Poster Tour 4: Models of Care Chair: John Dillon						
- 15.15 Morbidity And Mortality In HCV-Infected People Who Use Drugs (PWUD): Beyond the SVR Tianna Magel, Vancouver Infectious Diseases Centre, Canada	12		15.10 - 15.15		nity Drug Services through Combined Hepatitis C and Opiate Substitution Treatment Prescription					
5 - 15.20 Effect of a Single-Day Investigation for HCV Infection on Treatment Initiation among PWID	, Before and Afte	er Universal Access to Direct Acting Antivirals	15.15 - 15.20	"Ask a Friend" Identifying the Hidden Population: Former Intravenous Drug U	Users who are no Longer in Contact with Services. A Respondent Driven Sampling Protocol					
Valérie Martel-laferrière, CHUM, Canada 1-15.25 Working Towards Micro-Elimination of HCV in PWID. A Direct Observed Therapy vs Fortr Christian Sharkev, NHS Tayside, United Kingdom	ightly Collection	Study for HCV Treatment – Advance HCV Study	15.20 - 15.25	Sarah Donaldson, NHS Tayside, United Kingdom Seamless Integration of Hepatitis C Treatment within an Intravenous (IV) Hyd Monty Ghosh, 941, Canada	dromorphone Opioid Agonist Treatment (IOAT) Program					
- 15.30 Randomized Clinical Trial to Test E-health Interventions to Improve Adherence to a Once- Jeffrey Weiss, Mount Sinai, United States	daily Single-table	et Regimen in Patients with Chronic Hepatitis C Virus Infection	15.25 - 15.30	Rural US Drug User Health Through Syringe Access Programming Pamela Lynch, Harm Reduction Michigan, United States						
- 15.35 Feasibility of rapid hepatitis C point-of-care RNA testing and treatment at an integrated su Kate Mason, Toronto Community Hep C Program, Canada	pervised consun	nption site in Toronto, Canada	15.30 - 15.35		Enhances Access to Direct Acting Antiviral (DAA) Therapy for Hepatitis C (HCV)					
 15.40 Micro Elimination Enhanced by a Network Connecting all Detoxification and Substitution I Effrosyni Tsirogianni, Greek Organisation Against Drugs, Greece 	Programs with ar	n Expertized Hepatology Clinic in Northern Greece	15.35 - 15.40	Improving SVR12 Follow-Up in Primary Care with a Structured Hepatitis C As Phillip Read, Kirketon Road Centre, Australia	Assessment Tool					
Session P: Prisons Room: Montreal A & B, Level 11	15:45 - 17.15	Session Q: Strategies to enhance testing and diagnosis Room: Montreal C & D, Level 11	15:45 - 17.15	Session R: Neglected but not forgotten: innovative ways to engage women w Room: Fortifications, Level 9	who use drugs into HCV care (supported by IAS)					
Chairs: Nadine Kronfli and Matthew Akiyama 5 - 16.05 Tackling prisoner health via an upstream public health approach	15.45 - 16.05	Chairs: Jason Grebely and Karine Lacombe Diagnostics for hepatitis C: Where do we stand and what lies ahead?	15.45 - 15.50	Chairs: Marina Klein and Judy Chang Myanmar Video						
Prem Thurairajah, Changi General Hospital, Singapore		Sonjelle Shilton, The Foundation for Innovative New Diagnostics, Switzerland	15.50 - 16.10	Médecins du Monde Hepatitis C Screening and Management Among Women Who Inject Drugs. A Gladys Mwende Ngwe, Medicins du Monde, Kenya	A Case of Nairobi County, Kenya					
5 - 16.25 Project ECHO as a model for hepatitis care in the prisons	16.05 - 16.25	Expanding hepatitis C testing and diagnosis for people who inject drugs in low- and middle-income countries: Successes and challenges	16.10 - 16.30	Gender-based approaches to harm reduction and anti-violence programs for	r women who use drugs in Ukraine					
Karla Thornton, University of New Mexico, United States 5 - 16.45 Hepatitis C testing and treatment in correctional centers in the United States	16.25 - 16.45	Ernst Wisse, Medecins Du Monde, France How can we facilitate the implementation of novel testing strategies and diagnosis	16.30 - 16.50	Velta Parkhomenko, Club Eney, Ukraine Sheway: An interdisciplinary response to improving outcomes for pregnant v	women who use substances					
Anne Spaulding, Emory University, United States		beyond the laboratory? Philip Cunningham, St Vincent's Hospital, Australia		Janine Hardial, Sheway Clinic, Vancouver, Canada						
5 - 17.15 Questions & Discussion	16.45 - 17.15	Questions & Discussion	16.50 - 17.15	Questions & Discussion						

Day 3	Moving beyond hepatitis C										
	Registration Light Breakfast and Poster Viewing										
	Level 8										
09.30 - 11.00	Session S: Hepatitis C and Health for People who Use Drugs Room: Montreal Ballroom, Level 11 Chairs: Naveed Janjua and Laurence Marsillan										
	Reyond Hepatitis C: Improving the health and lives of people who use drugs Mark Tyndall, University of British Columbia, Canada										
09.50 - 10.10	Health economics of substance use and hepatitis C: Informing practice	and policy									
	Bruce Schackman, Weill Cornell Medical College, United States Questions & Discussion										
		g people with r	ecent injection drug use or current opioid substitution therapy: The SIMPLIFY and D3FEAT studies								
	Evan Cunningham, The Kirby Institute, UNSW Sydney, Australia	antivinal treatme	nent for hepatitis C in patients receiving opioid substitution therapy: A pragmatic cluster randomised trial								
	Andrew Radlev, NHS Tayside, United Kingdom	antiviral treatil	tent for nepatitis C in patients receiving opioid substitution therapy: A pragmatic cluster randomised trial								
	Coffee Break and Poster Viewing										
11.00.10.00	Level 8										
11.30 - 12.00	Session T: 'Connecting with Care' – A Film Preview of Models of Care from Canada and beyond' Room: Montreal Ballroom, Level 11 Chairs: Conor Ashleigh										
11.30 - 11.35	Introduction										
11.35 - 11.40	Conor Ashleigh, Visual Story Teller, Australia The ENHANCE project, an intervention to increase hepatitis C diagnosis	s and treatmen	t in Tehran. Iran								
	Maryam Alavi, ENHANCE, Australia										
	Montreal's many models of care Julie Bruneau, CRISM, Canada; Hugo Bissonnet, Centre Sida Amitie, Canada	; Martin Page, D	opamine, Canada								
	A Saskatchewan Story, Athahkakoop's Indigenous Model of Care Noreen Reed, Athahkakoop Clinic, Canada; Jennifer Ahenakew, Athahkakoop	Canada: Stuar	t Skinner University Of Saskatchewan, Canada								
11.50 - 12.00	Questions & Discussion	, Janada, Oludi									
12.00 - 13.45	Lunch & Poster Viewing Level 8										
12.30 - 13.30	INHSU GAM										
13.45 - 14.45	Room: Fortifications, Level 9 Session U: Hepatitis C reinfection	13.45 - 14.45	Session V: Beyond hepatitis C	13.45 - <u>14.45</u>	Session W: Models of care to enhance engagement in care						
	Room: Montreal A & B, Level 11 Chairs: Charlotte Laniece and Phillip Read		Room: Montreal C & D, Level 11 Chairs: Sione Crawford and Sarah Larney		Room: Fortifications, Level 9 Chairs: Lynn Taylor and Chris Fraser						
	Hepatitis C Virus Reinfection after Successful Treatment with Direct- Acting Antiviral Therapy in Canada		Operationalizing the risk environment: spatial distribution of people who inject drugs and hotspots of social injecting activity in Montreal, Canada	13.45 - 14.00	Community centric HCV testing and treatment for PWID in Manipur, India - The Head Start Project						
14.00 - 14.15	Naveed Janjua, BC Centre For Disease Control, Canada Risk of HCV reinfection and associated patterns of behaviour among	14.00 - 14.15	Nanor Minoyan, University of Montréal CRCHUM, Canada The impact of opioid agonist treatment on mortality among people who inject drugs: A 3 site modelling	14.00 - 14.15	Babu Entroor Ramachandran, FIND, India 'Get Tested LeEDs': (Re)-diagnosing and (re)-engaging PWID with blood borne viruses (BBV) in an urban						
	men who inject drugs or who have sex with men in Canada		analysis		emergency department						
	Brendan Jacka, Research Institute, Centre hospitalier de l'Université de Montréal (CHUM). Canada		Jack Stone, University Of Bristol, United Kingdom		Emma Page, Leeds Teaching Hospitals Trust, United Kingdom						
	Hepatitis C virus reinfection following antiviral treatment among people who use or inject drugs: a systematic review and meta-analysis		Growing old with drugs. Preliminary results from a qualitative study on the aging process of drug users in opioid substitution treatment	14.15 - 14.30	Treating people where they are: Nurse-led hepatitis C (HCV) micro-elimination project for networks of people with recent injecting drug use in Victoria, Canada						
	Behzad Hajari, The Kirby Institute, UNSW Sydney, Australia		Margheria Luciani, University Of Applied Sciences Of Southern Switzerland, Switzerland		Karen Lundgren, Cool Aid Community Health Centre, Canada						
14.30 - 14.35	Drug use and reinfection during and following HCV treatment with	14.30 - 14.35	Impacts of Hepatitis C Virus Infection Treatment for Patients in Treatment for Opioid Use Disorder	14.30 - 14.35	A cost-benefit analysis of primary versus hospital-based specialist care for direct acting antiviral						
	elbasvir/grazoprevir (EBV/GZR) among patients receiving opioid agonist therapy: Final results from the CO-STAR study				hepatitis C treatment						
	Gregory Dore, The Kirby Institute, UNSW Sydney, Australia	Sydney, Australia Robert Heimer, Yale University School of Public Health, United States		14.25 14.40	Nick Scott, Burnet Institute, Australia						
	Low rate of reinfection among a cohort of people who inject drugs successfully treated for hepatitis C virus infection within a		An international systematic review of methadone and buprenorphine doses used in the treatment of opioid use disorder	14.55 - 14.40	Engaging mother-infant dyads in hepatitis C care through perinatal pediatric infectious diseases consultation						
	multidisciplinary program Brian Conway, Vancouver Infectious Disease Centre, Canada		Sarah Larney, National Drug And Alcohol Research Centre, UNSW Sydney, Australia		Rachel Epstein, Boston Medical Center, United States						
	Rare HCV Re-Infection after DAA Treatment in an Integrated All-Under-	14.40 - 14.45	High Rates of Opioid Overdose and Witnessed Overdose in PWID Receiving HCV Treatment: Data from the	14.40 - 14.45	Removing health insurance barriers and incorporating harm reduction with a physician - nurse -						
	One-Roof Care Setting		ANCHOR Study		pharmacist team, to optimize hepatitis c virus (HCV) treatment in a U.S. co-located HCV/methadone maintenance program						
44.45.45.45	Claudia Bernardini, ARUD, Switzerland		Elana Rosenthal, University Of Maryland School Of Medicine, United States		Jackie Habchi, Codac Behavioral Health, United States						
14.45 - 15.15 15.15 - 16.30	Coffee Break and Poster Viewing Session X: Beyond Injecting Drug Use	15.15 - 16.30	Session Y: How do we move forward policies on hepatitis C and drug use?	15.15 - 16.30	Session Z: The critical role of the nurse for integrating health care for people who use drugs						
	Room: Montreal A & B, Level 11		Room: Montreal C & D, Level 11		Room: Fortifications, Level 9						
15.15 - 15.35	Chairs: Suzanne Brissette and Philip Bruggmann Emerging trends in stimulant use and the impact on hepatitis C	15.15 - 15.35	Chairs: Jeffrey Lazarus and Annette Gaudino Policies to enhance access to hepatitis C prevention and treatment for people who use drugs	15.15 - 15.25	Chairs: Lesley Gallagher and Donna Zukowski Easy Access Within the Clinic and Corrections						
					Janet Catt, Kings College Hospital NHS Foundation Trust, United Kingdom						
	Francisco Inacio Bastos, Oswaldo Cruz Foundation, Brazil		Niklas Luhmann, World Health Organisation, Swizerland	15.25 - 15.35	Collaborating Within the Addiction Clinic Sidsel Sejr, KABS, Glostrup Kommune, Denmark						
15.35 - 15.55	Emerging Trends in alcohol and the impact on hepatitis C	15.35 - 15.55	Taking stock of a decade of drug policy: Where have we come and where to next?	15.35 - 15.45	Treat and Teach - Outreach to Indigenous Communities Lesley Gallagher, Saskatchewan Infectious Disease Care Network (SIDCN), Canada						
ı	Jurgen Rehm, Centre for Addiction and Mental Health, Canada		Marie Nougier, International Drug Policy Consortium, Country	15.45 - 15.55	The Independent Nurse Working as a Physician Delegate						
15.55 - 16.15	Emerging Trends in mental health and the impact on hepatitis C	15.55 - 16.15	Market dynamics and the hepatitis C response: Facilitating policy decisions to improve affordable, equitable	15.55 - 16.05	Jan Tait, Ninewells Hospital Dundee, United Kingdom Managing HCV Elimination						
			access to treatment								
	Didier Jutras-Aswad, Canadian Research Initiative in Substance Misuse		Sean Regan, Clinton Health Access Initiative, United States	16.05 - 16.15	Heidi Friðriksdóttir, Landspítali University Hospital, Iceland Confidence to treat HCV through Mentorship						
	(CRISM), Canada				Manasseh Murage. Médecins du Monde. Kenya						
	Questions & Discussion	16.15 - 16.30	Questions & Discussion	16.15 - 16.30	Questions & Discussion						
16.30 - 16.40 16.40 - 17.30	.40 Room Movement .30 Conference Closing										
	Room: Montreal Ballroom, Level 11 Chairs: Julie Bruneau and Marina Klein										
	0 Community Rapporteur										
16.50 - 17.00	Policy & Epidemiology Rapporteur Jack Stone, University of Bristol, United Kingdom										
	Linkage to Care & Treatment Rapporteur										
	Tracy Swan, Consultant United States 20 Models of Care Rapporteur										
	John Dillon, University of Dundee, Scotland										
17.20 - 17.30	Conference Closing and Introduction of Upcoming Conference				· · · · · · · · · · · · · · · · · · ·						