EVALUATION OF AN INTEGRATED NURSE MODEL OF CARE PROVIDING HEPATITIS C TREATMENT TO PEOPLE ATTENDING HOMELESS SERVICES IN MELBOURNE, AUSTRALIA

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Background:

The prevalence of hepatitis C virus (HCV) among homeless people has been reported to be high and associated with a history of and/or recent injection drug use (IDU). People who are homeless often have multiple and complex health and social needs that may take precedence over hepatitis C testing and treatment. We quantitatively evaluated the outcomes of a pilot service aiming to provide access to HCV treatment among people attending homeless services.

Model of care:

Clients of two sites providing services to people who are homeless or at risk of becoming homeless were referred to a nurse specialising in HCV from November 2016 to July 2017. The nurse provided testing and other follow-up services and prescription was provided by an affiliated doctor. A questionnaire regarding IDU and accommodation status was completed by those who were tested.

Effectiveness:

Overall 67 clients were referred, 52 were tested and 39 were HCV positive. Of those with HCV, 64% were male, 92% were Australian born and non-indigenous and 46% reported sleeping rough prior to service engagement. IDU history was reported by 29 people, 70% had injected recently, less than three months ago. As of July 2017, 62% had initiated treatment and of those, 46% had completed treatment. Treatment initiation was significantly lower among people who reported sleeping rough compared to those who did not (39% vs 81%, p=0.007). There was no significant difference in treatment based on recent IDU (53% vs 70%, p=0.265).

Conclusion:

The pilot integrated nurse service was able to provide HCV treatment to the majority of people diagnosed with HCV attending the homeless services and treatment was completed by almost half of those who initiated treatment. Despite this, those who had reported sleeping rough may still face personal and/or system level barriers to HCV treatment uptake. Understanding and overcoming these barriers is critical among this population.

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