

CHALLENGES ON THE ROAD TO HCV ELIMINATION: IDENTIFYING GAPS IN HCV TESTING AND TREATMENT AMONG PEOPLE WHO INJECT DRUGS IN ENGLAND

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Background:

In England, over 80% of those with HCV infection have a history of injecting drugs. We quantified the HCV cascade of care (CoC) among people who inject drugs (PWID) in England and determined whether this changed after direct-acting antivirals (DAAs) were introduced.

Methods:

Data were taken from 9 rounds of national annual cross-sectional surveys of PWID recruited from services (2011-2019; N=12,320). Study rounds were grouped as: pre-DAAs (2011-2014), DAA transition period (2015-2016) and post-DAAs (2017-2019). Participants were tested for HCV antibodies and completed a short survey. For those antibody-positive, we assessed the CoC as: HCV testing (ever), received positive test result, seen a hepatologist, and ever treated. We also assessed the proportion of antibody-negative PWID recently (previous year) tested for HCV. Multivariable logistic regression was used to determine whether time-period was associated with recent HCV testing (antibody-negative participants) and lifetime HCV treatment (antibody-positive participants).

Results:

Overall, 14.6% of HCV antibody-positive PWID reported lifetime HCV treatment, increasing from 10.0% pre-DAAs to 27.3% post-DAAs. There were statistically significant increases in all stages of the CoC. In multivariable analyses, ever receiving HCV treatment was significantly higher post-DAAs (vs pre-DAA: aOR:2.37, 95%CI:1.89-2.97). In the post-DAA period, recent homelessness (vs never aOR:0.66, 95%CI:0.44-0.98), duration of injecting (≤ 3 years vs > 3 years; 0.36, 95%CI:0.15-0.85) and past (aOR:8.07, 95%CI:1.01-64.70) and recent (aOR:7.77, 95%CI:1.00-60.16) needle syringe program use (vs never) were associated with ever receiving HCV treatment. Across years, 40.9-52.1% of antibody-negative PWID reported recent HCV testing, with no significant difference over time.

Conclusion:

Following introduction of DAAs, HCV diagnosis, linkage to care and treatment increased. Further improvements in diagnosis and linkage will help achieve HCV elimination in England.

Disclosure of Interest Statement:

No conflicts to declare