Rapid Hepatitis C Virus assessment and linkage to treatment in an Australian Inner-City Emergency Department.

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Background: Direct Acting Antiviral (DAA) treatment has been prescribed for ~50,000 people living with HCV since 2016. Elimination of HCV requires identification of untreated populations. People who inject drugs (PWID) are most at risk of acquiring HCV, and commonly attend Emergency Departments.

Objective: The objective was to assess the efficacy of screening ED patients with point of care (POC) HCV antibody test and linkage to outpatient HCV treatment.

Method: A prospective observational pilot study over a 3-month period, in an inner-city, Melbourne ED. Participants who identified at least one risk-factor on a screening questionnaire were offered POC HCV antibody test. Those with a reactive result were offered confirmatory testing, a liver clinic appointment and, where appropriate, DAA treatment. Outcome measures were; HCV risk factors, HCV sero-positivity, and rates of linkage to care.

Results: Of the 3931 presentations, 2409 patients were eligible. 1122(47%) participated, 306(13%) declined and 978(41%) were not approached. 378(34%) participants reported at least one risk factor and 368(97%) underwent POC HCV antibody testing, of whom 50(14%) had a reactive result. Of the 50 seropositive participants, 88% had a history of IDU, 32% were newly diagnosed, and 24% were homeless. Of those referred to clinic(n=50), 30(60%) were PCR positive and 8/30(26%) attended clinic. Eleven participants commenced treatment, and results for SVR are pending.

Conclusion: ED screening for PWID is a high yield strategy to identify people with HCV infection. Linkage to care was challenging in this population, new models are needed to improve the HCV cascade of care for marginalized individuals.

Significance: This study is the first in Australasia to link ED patients to curative HCV treatment and provides the first estimate of the prevalence of HCV in this population. It contributes valuable information internationally given the unique accessibility to DAA treatment within Australia, and contributes towards the WHO goal of elimination of HCV.