



Preliminary results about HCV Care Cascade among PWID in Rome: “Una regione senza la C” project.

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Introduction

- Oral direct antiviral agents (DAAs) are now available and can eradicate HCV in virtually all patients. Treatment can be highly effective in People Who Inject Drugs (PWID), with sustained virological response rates similar to the non-drug-using population.
- Most of the PWID are **Out Of Care** (OOC), unaware of their health status or unable to engage in a diagnosis and treatment workup.
- ‘Una regione senza la C’, promoted by Lazio Region in partnership with EpaC ONLUS, CNCA and Infectious Disease Clinic of Tor Vergata University, is a project that aims to validate a territorial screening and referral network for PWID.

Methods

- 13 low threshold harm reduction services** of Lazio were involved in contacting PWID, offering counselling about HCV and performing Rapid HCV Antibody salivary test.
- People with positive screening test were referred to the Infectious Diseases Clinic of Policlinico Tor Vergata for the engagement in care, through a reserved fast track. We report data collected from October 2017 to February 2018.

	N	%		N	%
Population	66		Previous treatment		
Active PWID	39	60	Naive	59	90
<i>Multidrug users</i>	15	38,5	Experienced (IFN+RIBA)	7	10,6
<i>Chaotic</i>	25	64	Null responder	5	
Co-infections			Reinfection	1	
<i>HBV occult</i>	23	34,8	Genotypes		
<i>HBV active</i>	1	1,5	1 a	26	45,6
<i>LTBI</i>	4	6	1 b	2	3,5
<i>HIV</i>	3	4,5	3 a	20	35
Cirrhosis	16	22,7	4	3	9
Median liver stiffness	6,9 kPa		<i>Others</i>	2	
More 10 yrs diagnosis	43	65,5	Baseline mutations	9	17,6

Table 1. Study population

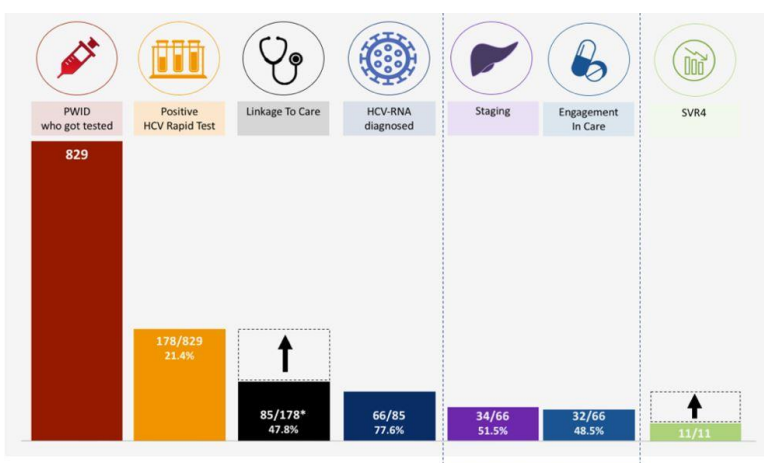


Figure 1. HCV cascade of care

Results

- 4116 PWID** received counselling, among them 517 agreed to be screened for HCV. HCV Rapid test resulted positive in **109/517 subjects (21%)**. Forty-nine out of 97 of the scheduled appointments at Policlinico Tor Vergata were actually performed: Chronic Active Hepatitis C was confirmed in 34/49 (69%) patients who were advised to start DAAs (**Figure 1**)
- Patients showed complex viral, clinical and social features (**table 1**): 61.7% is active drug user (15/21 multidrug users), predominant genotypes were 1a and 3a (45.5% and 39.4% for each genotype), baseline resistance associated mutations were found in 14.4%, one-fourth of the patients was cirrhotic (23.5%) and, overall, median liver stiffness was 7.1 kPa.
- Although more than 56% of study population received HCV diagnosis more than 10 years ago, 91.1% (31/34) were treatment naive. None of the HCV-positive PWID was HIV co-infected, while 33% of the population showed a concomitant occult HBV infection (1 patient had a chronic hepatitis B). Latent TB infection was diagnosed in 3 patients.

Conclusions

- HCV seroprevalence amongst PWID was 21%, almost ten-fold higher than in the general population: screening and treating fragile and high-risk PWID population should thus be considered a public health priority. The project has contributed to reveal that still a broad part of PWID is OOC.
- The network of health care professionals created, and the screening method used, have given the PWID an opportunity to start an accurate medical follow up; the high percentages of contacted and treated patients showed the efficacy of the procedures.