

'WE ALL LOST OUR STEAM" – BARRIERS TO PHARMACY-BASED IDENTIFICATION AND TREATMENT OF HEPATITIS C IN VICTORIA, BRITISH COLUMBIA

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Background: Canada is currently on target to reach the 2030 WHO goal of HCV elimination. Continued high rates of treatment initiation are required to meet this goal. Novel models such as Tayside, Scotland pharmacy-based HCV screening and treatment have proven successful to engage people who use drugs (PWUD) in HCV therapy with a simplified, task-shifted cascade of care. This study seeks to determine whether these successes can be replicated at community pharmacies in Victoria BC.

Methods: Four community pharmacies known to work with PWUD and provide opioid agonist therapy (OAT) were trained to provide consent and perform point of care HCV antibody screening and given a standardized tool kit of resources. They were supported by a study nurse to link to HCV RNA testing when antibody positive patients were identified, with initiation of HCV treatment offered to those found to be RNA positive. Qualitative interviews were conducted with five pharmacy staff to explore their experiences with HCV testing and treatment and the feasibility of pharmacists in HCV care cascade.

Results: To date pharmacy staff completed 171 HCV OraQuick tests: 53 tested positive for HCV antibodies: 21 people were HCV RNA negative, 20 previously treated and 1 self-cleared. Of the 22 RNA positive participants, 1 is pending treatment start, 21 people have started treatment, with 10 achieving SVR. While treating identified people has been successful, COVID 19 was identified as the main cause for lower-than-expected testing rates. Barriers included feeling hesitant about approaching participants, relational stresses due to social distancing, increased workload while chronically understaffed, general anxiety and overwhelm putting new initiatives to the bottom of the list of tasks.

Conclusion: This innovative pharmacy-based approach found people with limited connection to primary health care to test and treat HCV but requires more training and support to be more widely feasible.

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