INTEGRATED MEDICALLY ASSISTED THERAPY CLINIC FOR PEOPLE WHO USE DRUGS, A CASE OF KARURI CLINIC, KIAMBU COUNTY, KENYA

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Background

People who use Drugs (PWUD) face barriers to accessing health care services. This is attributed to poor health seeking behavior aggravated by poverty, limited education, social marginalization, stigma and discrimination. In Kenya there are an estimated 26,673 PWUD with 1310 being from Kiambu County. In 2019, MSF in collaboration with Kiambu County government started a One-stop-shop Medically Assisted Therapy (MAT) clinic in Karuri Level 4 hospital for PWUD dependent on opioids.

Description of model of care:

The MAT clinic is peer-led based and offers a one-stop-shop comprehensive package of care which includes outpatient care, opioid substitution therapy – methadone and Buprenorphine, psychosocial and mental health services, nutritional and sexual reproductive health services. Treatment for Human Immunodeficiency Virus, tuberculosis, hepatitis C, B and chronic diseases are also offered within the MAT clinic. Assisted referrals are done for PWUD requiring secondary and tertiary care. Exceptional Take home doses and deliveries of methadone and Buprenorphine are organized for those incarcerated, school going, hospitalized and recuperating at home. Decentralized Fixed Dispensing sites are to begin in Quarter 2 2022 to increase access for those far from the MAT clinic.

Effectiveness:

Since inception, 560 PWUD are enrolled on MAT with 12 started on highly active antiretroviral treatment with >90% suppression rate, 100 % of patients started on TB treatment were cured and 91.3% of ever started clients on direct-acting antivirals for hepatitis C attained sustained viral response and 72% completing hepatitis B vaccination. There is continued access to care for PWUD even after incarceration or illness.

Conclusions and next steps:

The integrated package of care has demonstrated an effective way of ensuring increased access of health care services for PWUD with good outcomes especially for those with comorbidities besides substance use disorder. The exceptional take home doses have played a big role in ensuring social reintegration for PWUD.

Disclosure of Interest Statement:

For all the authors, no conflict of interest has been identified MSF fund the project in Karuri, Kenya