

STRENGTHENING PATIENT'S PATHWAY FOR A BETTER HEPATITIS C CARE IN MOST VULNERABLE POPULATIONS: THE HCV PARCOURS PROJET IN ILE DE FRANCE (IDF)

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Background:

With current highly effective direct-acting antiviral (DAAs) and shortened treatment duration, screening and access to DAAs retention in care have become the new challenges in difficult to reach populations such as migrants or people who inject drugs

Approach:

In 2016, IDF Regional Health Agency and Assistance Publique des Hôpitaux de Paris launched a new program called HCV PARCOURS

The objectives were to improve HCV patient's care cascade through outreach & test and treat strategies and to include 1000 patients.

Eighty community-based medical partners, 5 medical units in prisons and 20 hospital services participated to this prospective, multicentric study.

Systematic HCV screening in at risk patients with serological or rapid test, optimized access to a specialized consultation within 24 to 72h following positive HCV screening with rapid treatment with DAAs

medical-social patients follow-up was performed by dedicated health mediators, social and medical advisors. Data were collected in an e-CRF.

Results:

488 patients are already included.

86.5% were male with a median age 46 years [37-52]. The average delay between diagnosis and inclusion was 5 years [0-16] with 71.5% of diagnoses > 6 months

60% of the patients were past or current drug users, 29% migrants from high endemic countries and 17.6% were prisoners. 7.4% were HIV-HCV and 3.1% HBV HCV coinfecting patients.

Among 387 documented PCR, 332 (85.8%) were positive. The stage of fibrosis was F0-F1 in 51.5% F2 in 21.2% F3 13.5% and F4 13.8%. To date 259 patients are treated by DAA.

360 (79.8%) PCR positive patients are still followed. In multivariate analysis the only factor associated with lost of follow-up was the prisoner status (OR 4.29, IC 95% 2.03-6.55)

Conclusion:

Personalized pathway in difficult to reach patients and coordination with dedicated team are needed with special efforts for the follow up of prisoners after detention.