

# HEPATITIS C TREATMENT AND LINKAGE TO CARE IN PATIENTS WITH MENTAL ILLNESS WHO USE DRUGS: A CORE TEAM NETWORK

**Erika Castro<sup>1</sup>, Nur Sampaio<sup>1</sup>, Aurélie Augsburger<sup>1</sup>, Lorenza Oprandi<sup>1</sup>**

<sup>1</sup>Policlinique d'addictologie-Service de Psychiatrie Communautaire-Departement de Psychiatrie - Centre Hospitalier Universitaire Vaudois (CHUV). Lausanne, Switzerland.

[erika.castro-bataenjer@chuv.ch](mailto:erika.castro-bataenjer@chuv.ch)

## BACKGROUND

The center offers outpatient care and harm reduction services for people with co-occurring drug abuse and mental disorders.

## AIM

To discuss hepatitis C treatment and linkage to care strategies in a subset of individuals identified with chronic hepatitis C during 2014.

## METHODS

Between 2014 and 2017, we integrated HCV screening, onsite chronic hepatitis C monitoring, fibroscan testing, and DAA prescription to the routine follow-up of patients in collaboration with local healthcare workers and networks. Cross-training of healthcare staff was developed by different clinical paths and interventions.

## RESULTS

- Overall, 33 (26.4%) patients were treated with DAA regimens according to drug-drug interactions with ongoing medications and national hepatitis C treatment labels.
- All patients were under opioid substitution treatment, 87.8% (n=29) were treated for at least 1 concomitant mental condition and self-assessment for parallel illegal opioid use was present in 84.8% (n=28) subjects during the span of DAA treatment.
- SVR at end of treatment (EOT) was achieved by 96.9% (n=32) of patients.

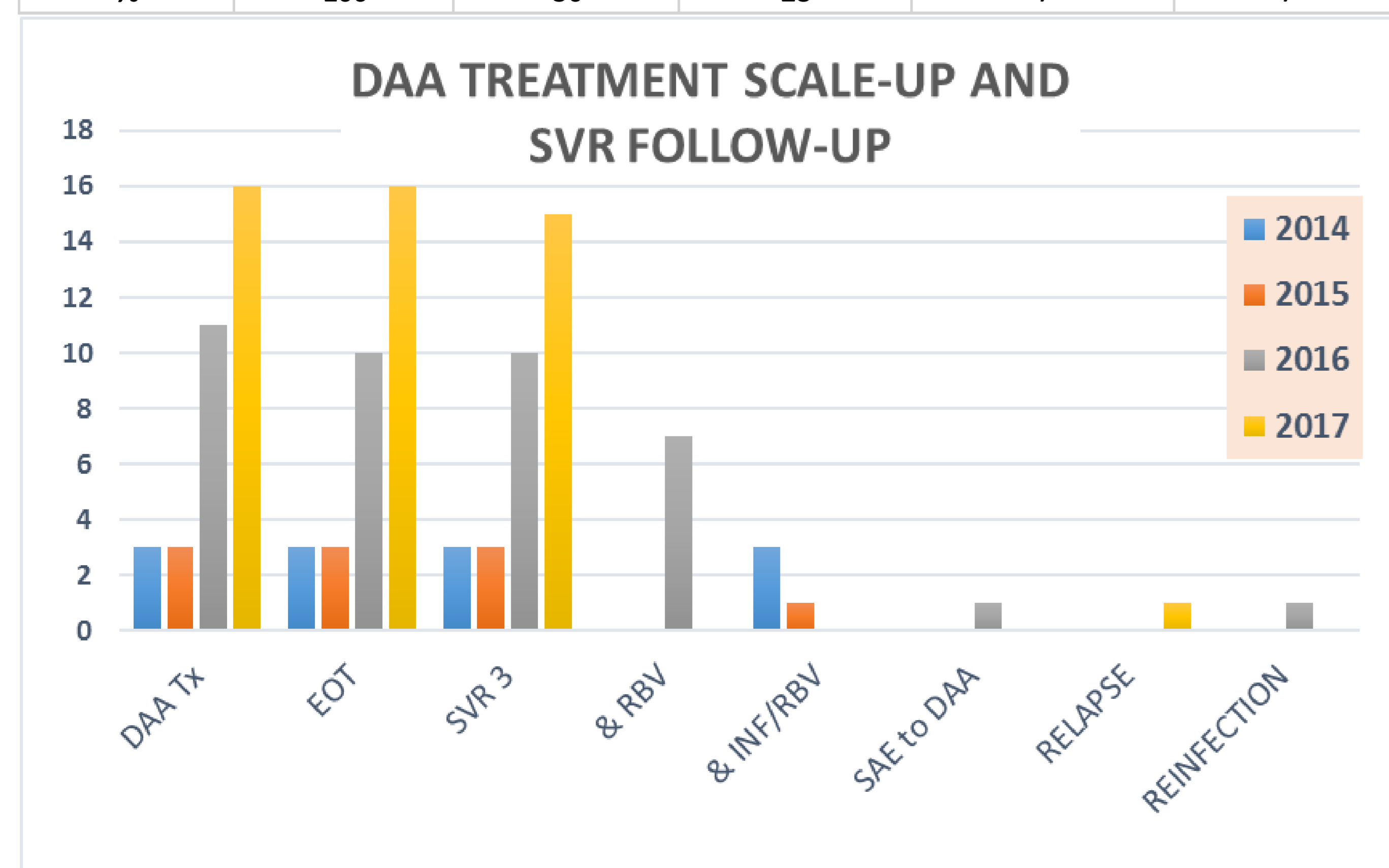
## CONCLUSIONS

Globally, 102 patient-years of core team follow-up were needed to achieve 97% EOT in this subset of 33 individuals.

Number of HCV treatment per year increased from 3 to 16 (~5 times) with core team network alliances and DAA treatment onsite prescription.

Linkage to care and hepatitis C treatment in patients with dual diagnosis requires interdisciplinary and transversal core teams at both patient and network levels.

START	ALL PATIENTS	Anti-HCV +	HCV RNA +	DAA	SVR
2014	446	223	125	33	32
%	100	50	28	7	7

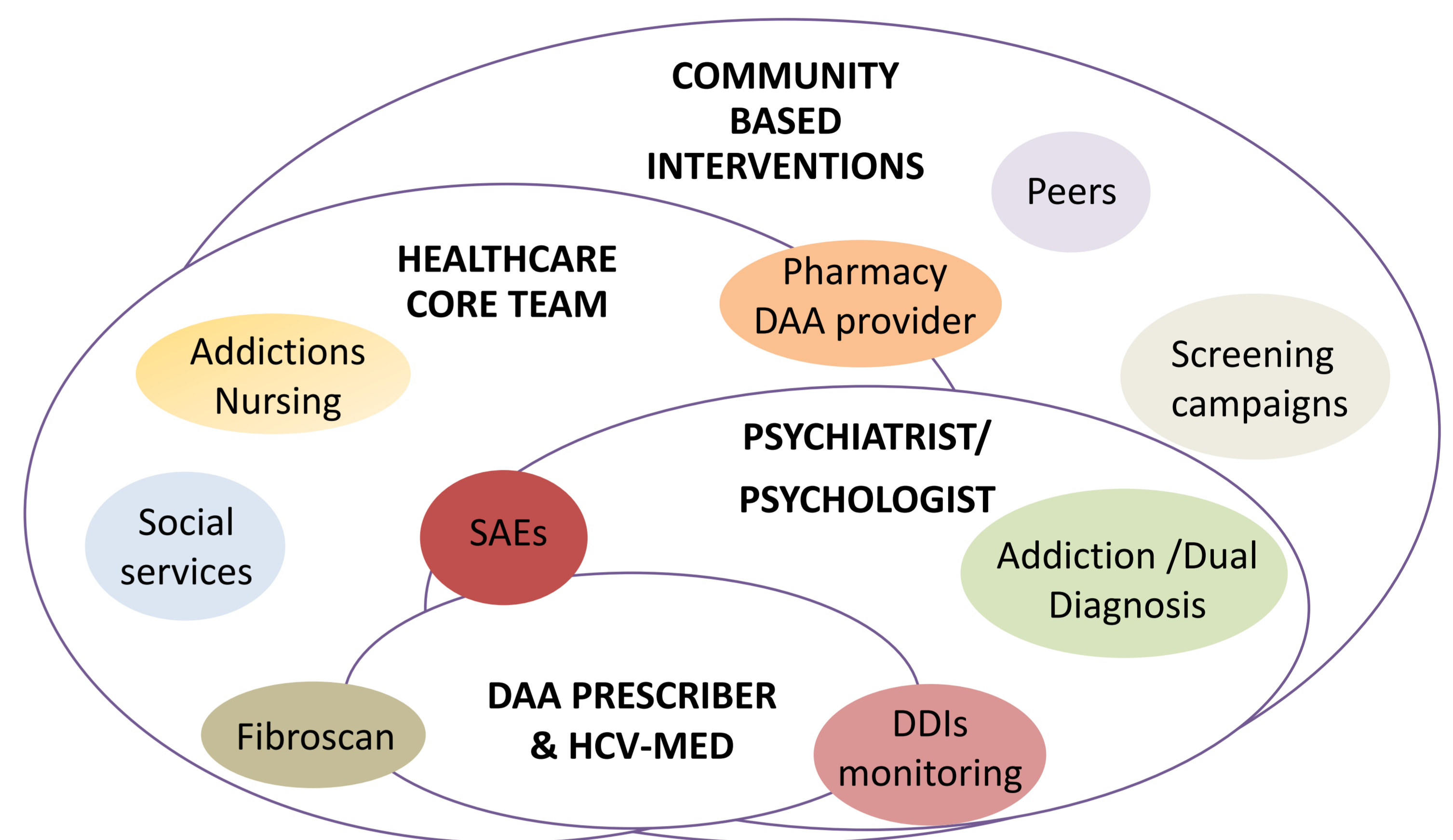


DAA treatment increased 4 times over 3 years in accordance to onsite HCV skilling and tx prescription as well as national improvement of access to DAAs.

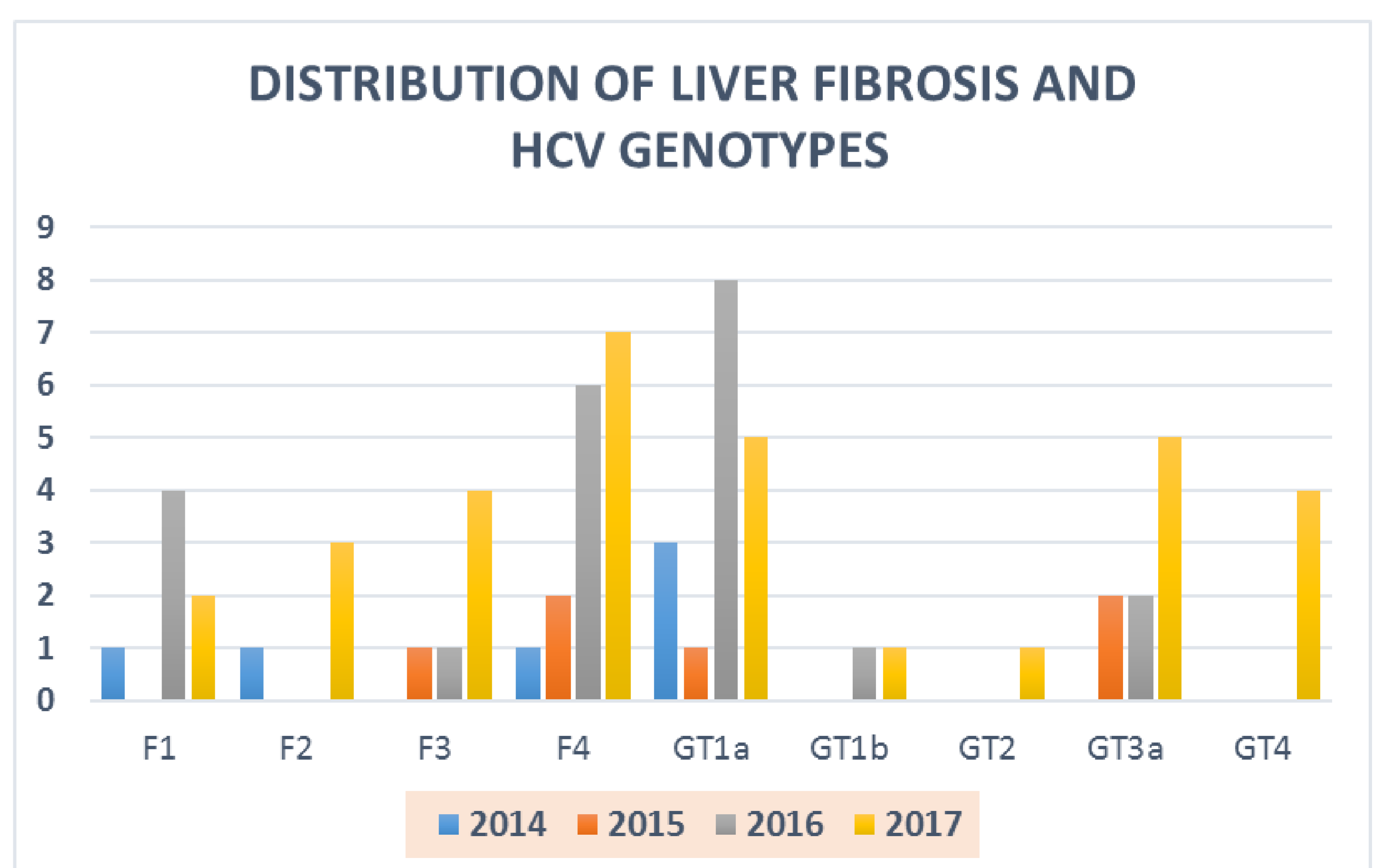
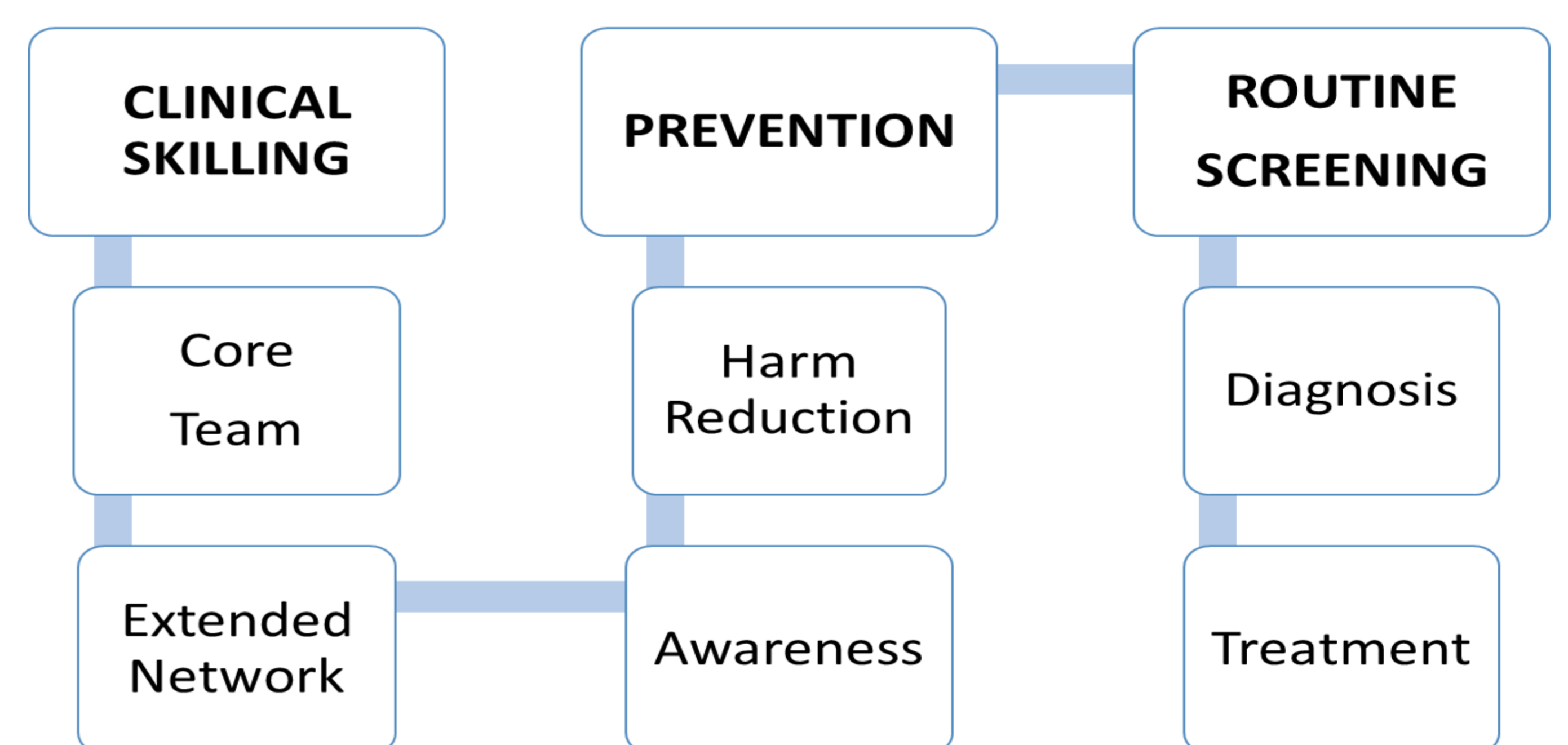
## ACKNOWLEDGEMENT

We are grateful to all patients for their contribution to this data as well as to staff colleagues and healthcare partners from the local network.

## ONSITE RESSOURCES AND CORE TEAM DOMAINS



## BUILDING SKILLS TO LINK PATIENTS TO CARE



In 2017 still an important proportion of patients receiving DAA treatment had liver cirrhosis. Being HCV genotypes 1 and 3 equally represented.

## CO-SPONSOR

We thank Gilead Switzerland for co-sponsoring presenting author's attendance to the conference.