

MAINTAINING HEPATITIS C MICRO-ELIMINATION IN A COHORT OF BENEFICIARIES OF TEMPORARY PROTECTION AND PEOPLE SEEKING INTERNATIONAL PROTECTION

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Background:

As part of Hepatitis C Virus (HCV) treatment programme 311 patients were treated for Hepatitis C with Direct acting antivirals (DAA) in our Opiate Agonist treatment (OAT) centres in CHO 7 Ireland with a view to micro-elimination within our client group.

The war in Ukraine saw an influx of Ukrainian Refugees 50,000 entering Ireland

Over the same period the number Georgians seeking international protection increased to over 1,800

We saw it as a priority to screen and treat for HCV to enhance patient care and aim to maintain our micro elimination.

Description of model of care/intervention:

The transit hub for this cohort fell in the catchment of one of our large clinics. A referral pathway for patients requiring OAT was established

HCV Treatment was provided by an addiction General Practitioner, Nurse Specialist and pharmacists.

63 persons were referred though this pathway to our OAT service – 13 HCV RNA positive

3 Ukrainian 10 Georgian

Virological screening:

13 were noted to be HCV RNA positive

11 treatment naive

2 treatment experienced

6 reported HCV previous treatment in Georgia (Viral status confirmed in Ireland)

Transient accommodation, language barriers and reluctance to disclose information proved challenging

Further work up

Patients had FibroScan, DDI screen and full blood workup (LFT, FBC, Renal AFP) and HCV DAA treatment was then commenced.

Effectiveness:

One patient has reached 12 week Post treatment SVR with Viral load not detected. All patients either completed treatment or are currently on treatment

Conclusion:

This model of care is a patient centred approach providing DAA treatment in conjunction with OAT

Despite the many Challenges it is possible treat HCV in patients arriving to our services with a view to maintain micro elimination.