

Exploring hepatitis C virus testing and treatment engagement over time in Melbourne, Australia: a study protocol for the EC-Experience prospective cohort study

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Introduction and Aims: In Australia, people who inject drugs (PWID) are disproportionately affected by hepatitis C virus (HCV). Despite the availability of curative direct acting antiviral (DAA) treatment, substantial barriers to HCV care exist for Australian PWID. In 2018 we established the EC Experience prospective cohort study to identify barriers and facilitators to engagement in HCV testing and treatment for PWID in Melbourne, Australia.

Design and Methods: Participants were recruited from five community health services into three study groups based on their level of self-reported engagement with HCV care, with quotas purposively sampled to each group: 1) those not recently tested for HCV; 2) those living with chronic HCV, but not engaged in treatment; and 3) those recently completed HCV treatment. Participants complete behavioural questionnaires at baseline and two follow-up interviews. Participants can transition between study groups over time. Questionnaires include multiple domains; demographics, HCV care engagement, drug and alcohol use, stigma and discrimination, etc. Participant follow-up is scheduled to end in December 2021.

Key Findings OR Results: Between September 2018 – February 2020, 292 participants were recruited; 111 (38%) unengaged in testing, 127 (44%) unengaged in treatment and 54 (18%) who had completed treatment. Participants were predominantly male (69%), unemployed (90%), in stable housing (76%) and currently receiving opioid substitution therapy (78%). Associations with change to HCV care engagement will be analyzed longitudinally.

Discussions and Conclusions: Longitudinal data collected through repeated questionnaires will enable better understanding of progression through the HCV care cascade and guide the implementation of relevant interventions.

Disclosure of Interest Statement:

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