MAKING HEPATITIS C TREATMENT MORE ACCESSIBLE: A TEST AND TREAT MOBILE UNIT IN CATALONIA

<u>Portela M</u>¹, Galindo O¹, Torres M², Abadia S¹, Caballero R¹, Colomera P¹, Major X^{2,3}, De Miguel J¹, Colom J^{2,3}

¹ Red Cross, Catalonia, Barcelona, Spain, ² Program on HIV, STIs and Viral Hepatitis (PCAVIHV), Public Health Agency of Catalonia, Generalitat de Catalunya, Barcelona, Spain, ³ Program on Substance Abuse, Public Health Agency of Catalonia, Barcelona, Spain.

Background:

People who use drugs (PUD), have a high prevalence of Hepatitis C virus (HCV). Some Out-patient Drug Treatment Centres (CAS) in Catalonia are located far from hospitals and provide only HCV antibody rapid tests, which hinders referral pathways to treatment, with a high loss of follow-up. Therefore, a Mobile Unit (MU) has been deployed in 5 CAS in a county of Catalonia (Baix Llobregat), with the aim to screen and treat patients at the CAS, saving steps in the care process.

Description of model of care/intervention:

The MU with a nurse, a social educator and volunteers stops in front of each CAS, offering point-of-care tests for HCV (antibodies and RNA by GenXpert), HIV Ab and HBsAg and a portable Fibroscan to assess liver fibrosis. Results are shared with the CAS which adds other medical information and sends it to the corresponding hepatology services. Treatment is delivered to the CAS and dispensed to PUD. Most people start antiviral treatment before further specialist assessment, including people with F3-F4, who are then referred to the specialist for echography and follow-up. Volunteers can accompany patients.

Effectiveness:

322 people were screened from June 2021 to January 2022. Of those, 161 people (50%) were recruited at the CAS premises without prior appointment with the MU. So far, 116 (36%) were HCV antibody positive and 35 (11%) RNA positive. From those, 23 patients (66%) have initiated treatment, 15 (43%) have finished treatment and 1 have had an SVR (sustained virologic response). From those who initiated treatment, 4 patients were F3-F4 and were referred to the hepatologist. (*) These data will be updated at the Conference time.

Conclusion and next steps:

The two key strategies to eliminate HCV infection in drug users community is the development and implementation of active screening and fast treatment initiation at point of care.

Disclosure of Interest Statement: See example below:

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