

Hepatitis C treatment outcomes during the DAA era within a community-based service for people who inject drugs: results for the Queensland Injectors Health Network Treatment and Management Program, 2015-2021

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Introduction and Aims: Efforts to eliminate hepatitis C viral (HCV) infection have a particular focus on people who inject drugs (PWID), and rates of cure for these population groups depend on effective engagement by treatment services. However, little is known about levels of engagement or outcomes over time. This study examines the outcomes for PWID presenting for treatment through Queensland Injectors' Health Network from 2015 to 2021.

Design and Methods: Participants (n=1,270) were clients of QuIHN, a community-based organisation providing health services for PWID within a harm reduction framework. A retrospective observational study was conducted using treatment program data collected by QuIHN. Outcomes included initiation (scripting) and completion (sustained virologic response) of treatment, and time (days) to commencement of treatment.

Results: Participants mean age was 44 (range 18-70), 30% were female, and 17.5% were Aboriginal and/or Torres Strait Islander. Screening numbers were sustained across most study years, as were rates of treatment initiation and completion, and the mean time between screening and treatment decreased significantly each year. During the study period, 782 participants had confirmed HCV infection, of whom 682 (87%) participants started treatment. The main reasons for not starting treatment included being uncontactable and incarceration.

Discussions and Conclusions: Community-based HCV treatment services, operating within a harm reduction framework, can contribute to the desired rates of HCV cure for PWID. Extension of these services to enable enhanced engagement and support for specific groups, including people at risk of incarceration, is warranted.

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