

UNDERSTANDING HEPATITIS C REINFECTION AND FACTORS ASSOCIATED WITH HCV INFECTION IN NEW JERSEY, USA.

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Background:

Hepatitis C reinfection rates vary from different studies. North Jersey Community Research Initiative (NJCRI) was interested in studying the widespread substance use and hepatitis C reinfections in New Jersey. By utilizing NJCRI's Mobile Hepatitis C Clinic, we travel to a variety of substance use disorder treatment facilities to bring the services to the patients.

Description of model of care/intervention:

An observational study of hepatitis C care and treatment across the state of New Jersey looked at specific outcomes related to reinfections. The study duration was from 01/06/2022-1/27/2023. The Mobile Clinic unit travelled to individual substance use disorder treatment facilities. Services included; testing and blood drawn on site, a week later they had a telehealth visit with the provider who sent their prescription to a specialty pharmacy, who reached out to the clients and delivered their medications usually within one week of the telehealth visit. We defined re-infection as definite in a viremic patient with documented SVR in the past, or a patient with a new hepatitis genotype as possible reinfection in a patient who was treated in the past with no documented SVR.

Effectiveness:

Mean age of clients treated is 44 yrs of age (min, 22; max, 73). Six-hundred thirty-two clients were tested and treated for hepatitis C viremia during the study period at 40 treatment facilities. Treatment completion rates are at 89% of 540, loss to follow up are 11%. 3 % new infections were due to reinfection. Less than 2% of patients experienced treatment failure.

Conclusion and next steps:

Conclusion: Our findings support the use of a decentralized mobile unit to facilitate HCV treatment in vulnerable populations. Lowering reinfection rates by decreasing community viral load supports the HCV state elimination efforts.

Disclosure of Interest Statement:

Disclosure of conflicts of interest will be acknowledged in publications and presentations.