Overcoming barriers to CHC treatment: A meaningful and effective collaboration of a public sector organization with a patients' community organization

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Introduction

Greece is one of the five European countries with antiHCV(+) prevalence among PWID higher than 50% (EMCDDA 2017). For 2015 the prevalence is estimated 62% with patients under substitution representing the most affected subgroup (69.6% vs 54.8% at drug free programmes) (Greek Reitox Focal point Report 2017).

Given the long-term consequences of HCV infection, the often coexisting heavy alcohol use, and the ageing of drug users a high burden of liver related morbidity and mortality is a probability which Greece has to cope with.

Availability of an effective treatment is of major importance for this battle. Modelling studies by using current Greek data have shown that eradication of the infection could be achievable by treating a feasible number of patients (Gountas 2016).

Economic crisis has its remarkable impact on access to chronic hepatitis C (CHC) treatment. The National Organization for Healthcare Services Provision (EOPYY) provide free of charge DAAs only to a part of patients with CHC; liver fibrosis stage is the major criterion for DAAs treatment reimbursement.

Elastography, an excellent, non-invasive tool for measuring liver stiffness is not easily accessed by drug users in Greece :

- Many hepatology clinics are not equipped by the relevant device
- The cost of the test is high (50 €) for the majority of drug users in Greece
- The cost of elastography is not reimbursed by EOPYY or by any private insurance.

Aim of the study

To present the results of a collaboration activity between a patients organization and a public sector organization offering substitution treatment on overcoming one of the major CHC treatment barriers facing by drug users in Greece.

Methods

HELPA"Prometheus", a community based organization, with an elastography device donated by the pharma industry, visits OKANA substitution units in Greece (5/2016-today) in the framework of a nationwide project entitled "I Deserve to Know". Elastography is performed by HELPA"Prometheus" trained staff using FibroScan® 402, by Echosents.

Hellenic Liver Patients Association "Prometheus" was founded in 2012 and is the first and only patients association for liver diseases in Greece. "Prometheus" is focused on providing factual information on hepatitis matters as well as constant support to people living with viral Hepatitis B and C.

Additionally, "Prometheus" is dedicated to raise awareness, promote prevention for viral hepatitis and advocate for the rights of people who live with liver diseases.

Moreover, "Prometheus" actions aim to improve the provision of health and social care services for people living with hepatitis B and C and vulnerable social groups within the National Health System. A main pillar of the Association's purposes is to ensure that, access to treatment and healthcare services is unobstructed for all people who live with liver diseases. Additionally, the Association aims to systematically provide psychological support to people living with hepatitis and their family environment.

The **Organisation Against Drugs (OKANA)** was established pursuant to Law 2161/93, and has been operational since 1995 as a legal person that is governed by private law and reports to the Ministry of Health and Social Solidarity. OKANA provides services and programmes in the fields of prevention, treatment and reintegration.

After three law reformes, OKANA remains the only authorized organization to provide substitution treatment in Greece. Recently it runs 56 Substitution Treatment Units; the majority of them in cooperation with general public hospitals. There is a remarkable geographical coverage of the country with:

- 26 Substitution Treatment Units in Attica, 12 Substitution Treatment Units in Thessaloniki
- 1 Substitution Unit in each of the following Greek cities: Alexandroupoli, Agrinio, Chalkida, Chania, Corfu, Drama, Herakleion, Kalamata, Katerini, Kavala, Komotini, Lamia, Larissa, Livadia, Preveza, Rethymno, Serres, Rhodes, Veroia, Volos.

OKANA contribution

- Place (Substitution Treatment Units)
- MDs (Internists or General Doctors)
  - Organize the visits and inform patients
  - Interpretation of elastography results
  - Refer to a state hepatologist clinic
  - Counseling and follow up recommendations

PROMETHEUS contribution

- Portable Fibroscan device
- Trained staff to perform the elastography with all the respect to patients privacy and rights
- Counseling and support

Patients benefits

- **Elastography** (pre-requirement for DAAs reimbursement)
  - Free of charge
  - No need for extra transportation
  - No need for any prearrangement
  - No bureaucratic obstacles
- Awareness for disease stage and for further care and follow up

Results

When the abstract was submitted HELPA"Prometheus" staff has visited OKANA units in 4 Greek regions (Attica, Volos, Thessaloniki and Veroia). In total 487 were tested by the end of March 2017 (82% men, mean age of 45.4years).The main indication for testing was HCV infection (N=461, 94.7%). HIV/HCV coinfection was reported by 21/461(4.6%) while HBV/HCV by 5/461(1%). Among HCV infected, 308 (66,8%), 38 (8.2%), 35 (7.6%) and 80 (17,4%) were F0-F1, F2, F3 and F4, respectively.

The intervention was accepted with enthusiasm both by doctors and patients and the project has been expanded very rapidly. During one year(May 2016 to May 2017) 15 units were visited and the geographical distribution of the them was significantly broad: 7 units in Athens, 4 in Thessaloniki and 4 more at the rest of Greece. (Picture 1).

From the total number of 827 drug users tested by May 2017 (83% men) 67% were older than 40 years old. (Tables 1-3).

By using the recently reformed criteria of EOPYY 26% were eligible for DAAs treatment reimbursement as having been found with fibrosis score >7kpa.

Gender does not seem to be significantly associated with fibrosis score, although women were represented at higher percentages in the F0-1 stage group (66.9% vs 54,4%). (Table 4).

Older age was significantly related to cirrhosis (F4) with almost one out of three for those older than 50 years having been found with fibrosis scores higher than 12 kpa.

All patients received medical counseling related to secondary prevention (life style changes, follow up recommendations) while those classified at stage ≥F2 underwent further clinical and laboratory investigation and referred to a public hepatologist clinic in order to complete the procedure of treatment approval by EOPYY.

Picture 1. Map of Greece

Table 1-3. Drug users tested by Age groups, Gender and Fibrosis stage

Age groups	N	%
20-30	16	2%
30-40	256	31%
40-50	259	31%
50+	296	36%
Total	**827**	

Gender	N	%
Female	133	16%
Male	686	83%
Undefined	8	1%
Total	**827**	

Fibrosis stage(kPa)*	N	%
F0-1	463	56%
F2	145	18%
F3	83	10%
F4	136	16%
Total	**827**	

*Staging cut offs F 0-1: 0-7 kpa, F2: 7-9 kpa, F3: 9-12 kpa, F4: >12 Kpa

Table 4. Fibrosis stage and gender

	Fibrosis stage								
Gender	**F0-1**		**F2**		**F3**		**F4**		**Total**
F	89	66,9%	13	9,8%	10	7,5%	21	15,8%	133
M	373	54,4%	129	18,8%	71	10,3%	113	16,5%	686
U	1	12,5%	3	37,5%	2	25,0%	2	25,0%	8
Total	**463**		**145**		**83**		**136**		**827**

Table 5. Fibrosis stage and age

	Fibrosis stage								
Age groups	**F0-1**		**F2**		**F3**		**F4**		**Total**
20-30	11	68,8%	3	18,8%	2	12,5%		0,0%	16
30-40	175	68,4%	37	14,5%	25	9,8%	19	7,4%	256
40-50	146	56,4%	53	20,5%	24	9,3%	36	13,9%	259
50+	131	44,3%	52	17,6%	32	10,8%	81	27,4%	296
Total	**463**		**145**		**83**		**136**		**827**

Conclusions

Through the collaboration, a barrier to CHC treatment access is overcoming for a large number of drug users in Greece. Awareness of disease stage and counseling opportunities were increased while identification of patients needing treatment apart from helping patients on an individual level essentially contributes to country's efforts for HCV elimination.

References

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