

# REACHING OUT TO THE UNDIAGNOSED PEOPLE WITH HEPATITIS C VIRUS INFECTION IN BELGIUM

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Busschots D<sup>1,2</sup>, Bielen R<sup>1,2</sup>, Koc ÖM<sup>1,3</sup>, Dercon E<sup>4</sup>, Verrando R<sup>4</sup>, Windelinckx T<sup>5,6</sup>, Maertens G<sup>5</sup>, Bourgeois S<sup>7</sup>, Matheï C<sup>5</sup>, Robaey G<sup>1,2</sup>

<sup>1</sup>UHasselt, Faculty of Medicine and Life Sciences, Diepenbeek, Belgium, <sup>2</sup>Ziekenhuis Oost-Limburg, Department of Gastroenterology, Genk, Belgium, <sup>3</sup>Maastricht University Medical Centre, Medical Microbiology, School of NUTRIM, Maastricht, the Netherlands, <sup>4</sup>Center for Alcohol and other Drugs (CAD) Limburg, Hasselt, Belgium, <sup>5</sup>Free Clinic ngo, Antwerp, Belgium, <sup>6</sup>Harm Reduction, coordinator Needle exchange Flanders, Belgium, <sup>7</sup>ZNA Antwerp, Department of Gastroenterology, Belgium.

## INTRODUCTION

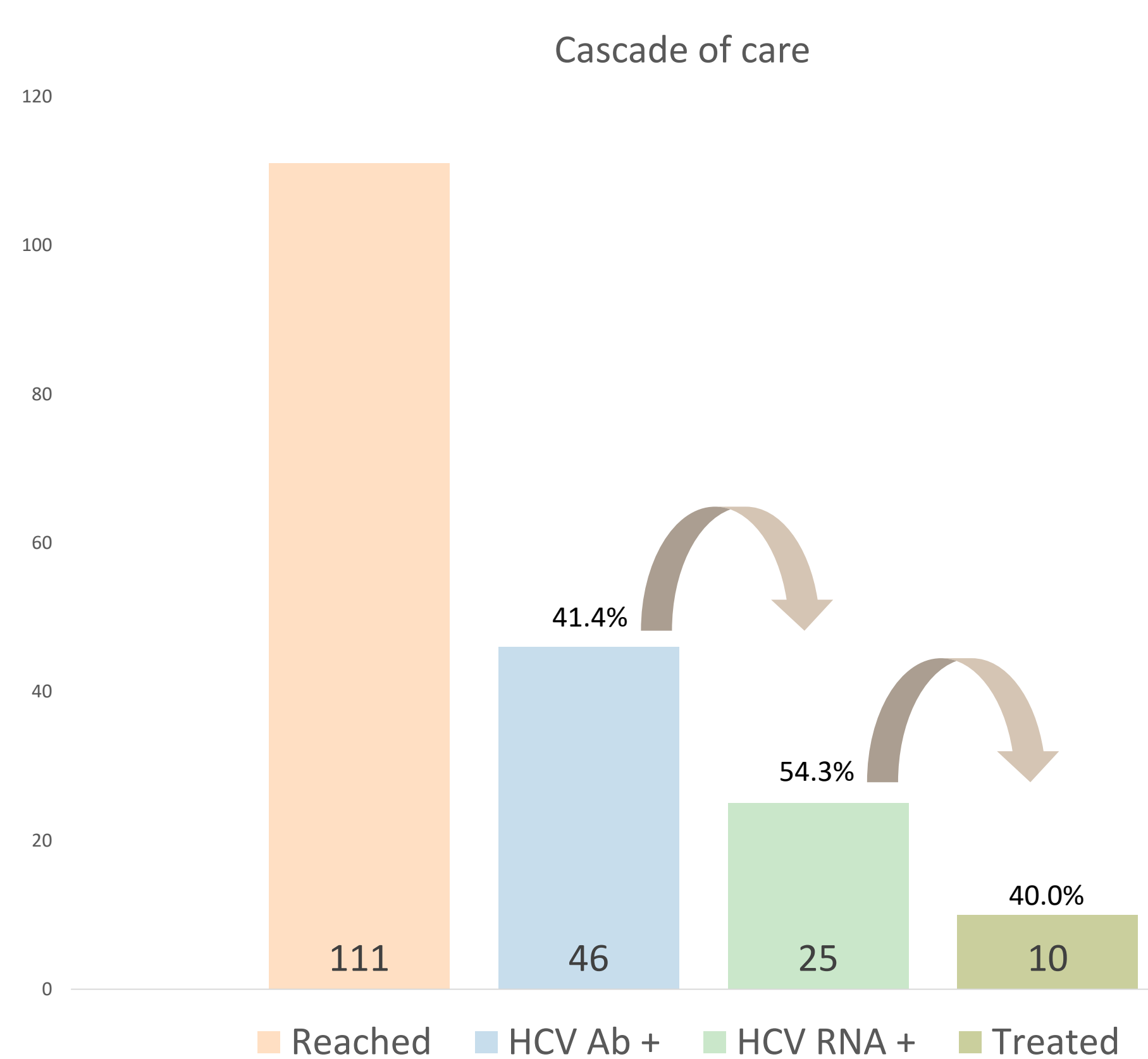
- Targeted screening for hepatitis C virus (HCV) infection is not yet widely executed in Belgium: mainly focussed on people who inject drugs (PWID) on opioid agonist therapy.
- Young people who inject opiate and amphetamine are often difficult to reach.

**AIMS:** Outreach to PWID who are not linked to drug treatment centers and to use the screening for HCV as a bridge to re-integration into the health care system.

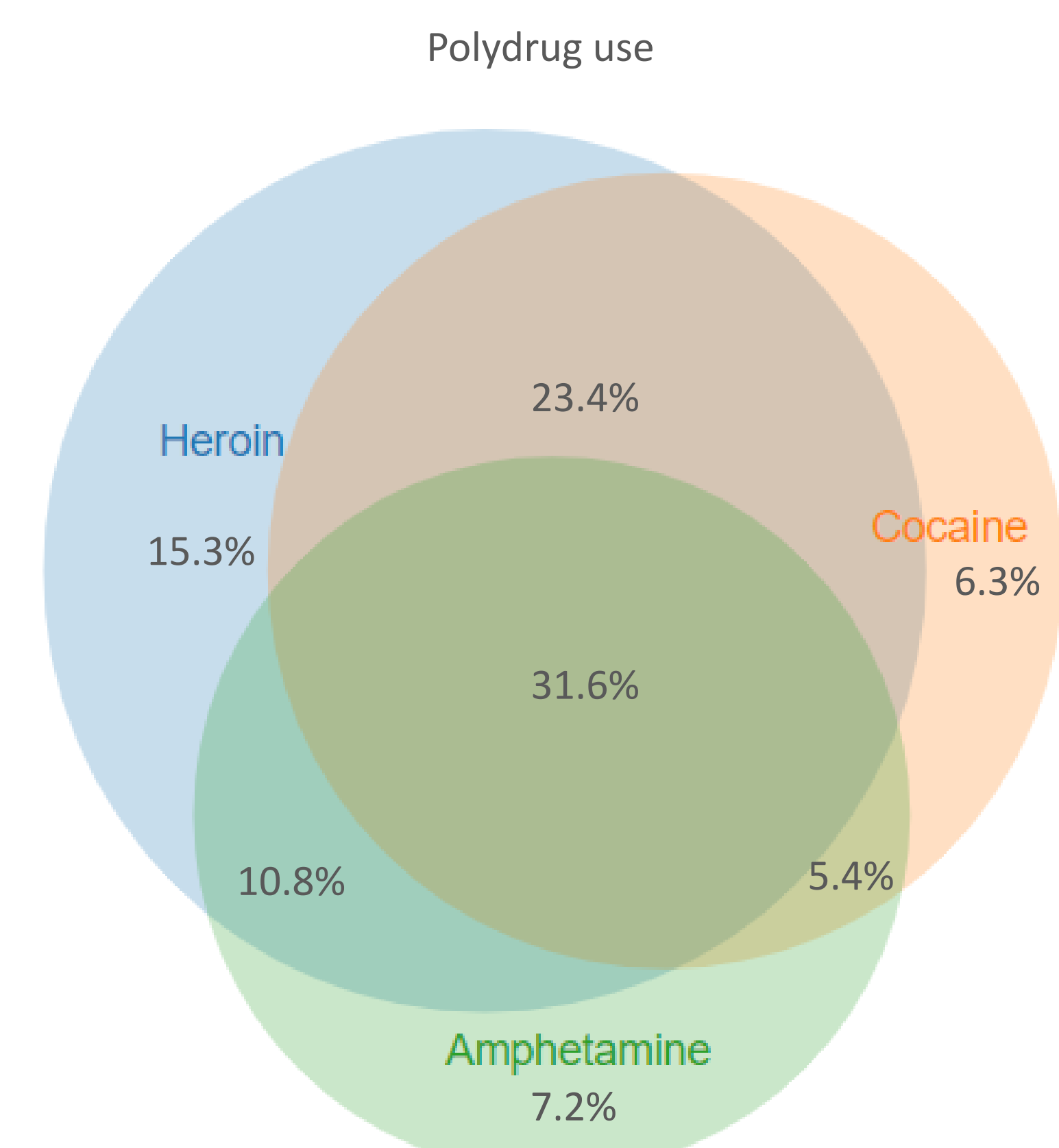
## MODEL OF CARE

- Multicentre, prospective, cohort study
- Flanders, Belgium
- Between September 2018 and April 2019 using a mobile home as a one-stop-shop
- Recruited by outreaching at organized screening events outside a substitution centre
  - ✓ ≥ 18 years and PWID
- Oraquick® test (finger prick) for HCV antibodies (Ab), if positive:
  - ✓ if the finger prick test is positive: blood sampling (HCV Ab and HCV RNA) and referral to a specialist

## EFFECTIVENESS



- Reached 111 PWID
- Mean age: 45 ± 8.9 years
- Combined drug use is high
- 6 cases had no venous access
- Genotyped (n=17):
  - ✓ 1a: 7 (41.2%)
  - ✓ 1b: 2 (11.8%)
  - ✓ 2b: 1 (5.9%)
  - ✓ 3a: 5 (29.4%)
  - ✓ 4: 2 (11.8%)



## CONCLUSION

This HCV outreach screening method **reaches effectively** an up to now **non served group** of **actively using PWID** with (combined) **amphetamine use** in almost half of the cases. Among them, **40%** of the HCV RNA positives **initiated treatment**.

## NEXT STEPS

- ✓ Expanding the program
- ✓ Comparing the results of a rural to an urban area
- ✓ Analyzing cost-effectiveness

## ACKNOWLEDGEMENTS

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## CONTACT

Dana Busschots  
Hasselt University, Agoralaan, Diepenbeek, Belgium  
Ziekenhuis Oost-Limburg, Schiepse Bos, Genk, Belgium  
E-mail: [dana.busschots@uhasselt.be](mailto:dana.busschots@uhasselt.be)

