

Bridging the Divide: Onsite HCV Case Management at Opioid Treatment Programs for People Who Inject Drugs

Wicks D, Drucker J

Hepatitis Education Project



Background

Many unique barriers exist for people who inject drugs (PWID) in accessing hepatitis C virus (HCV) care. [1] [2]

Hepatitis C treatment within OTP (opioid treatment program) has proven only minimally effective at linking PWID to treatment. [3][4] New models of care are needed to overcome system and provider barriers for HCV treatment. [5]

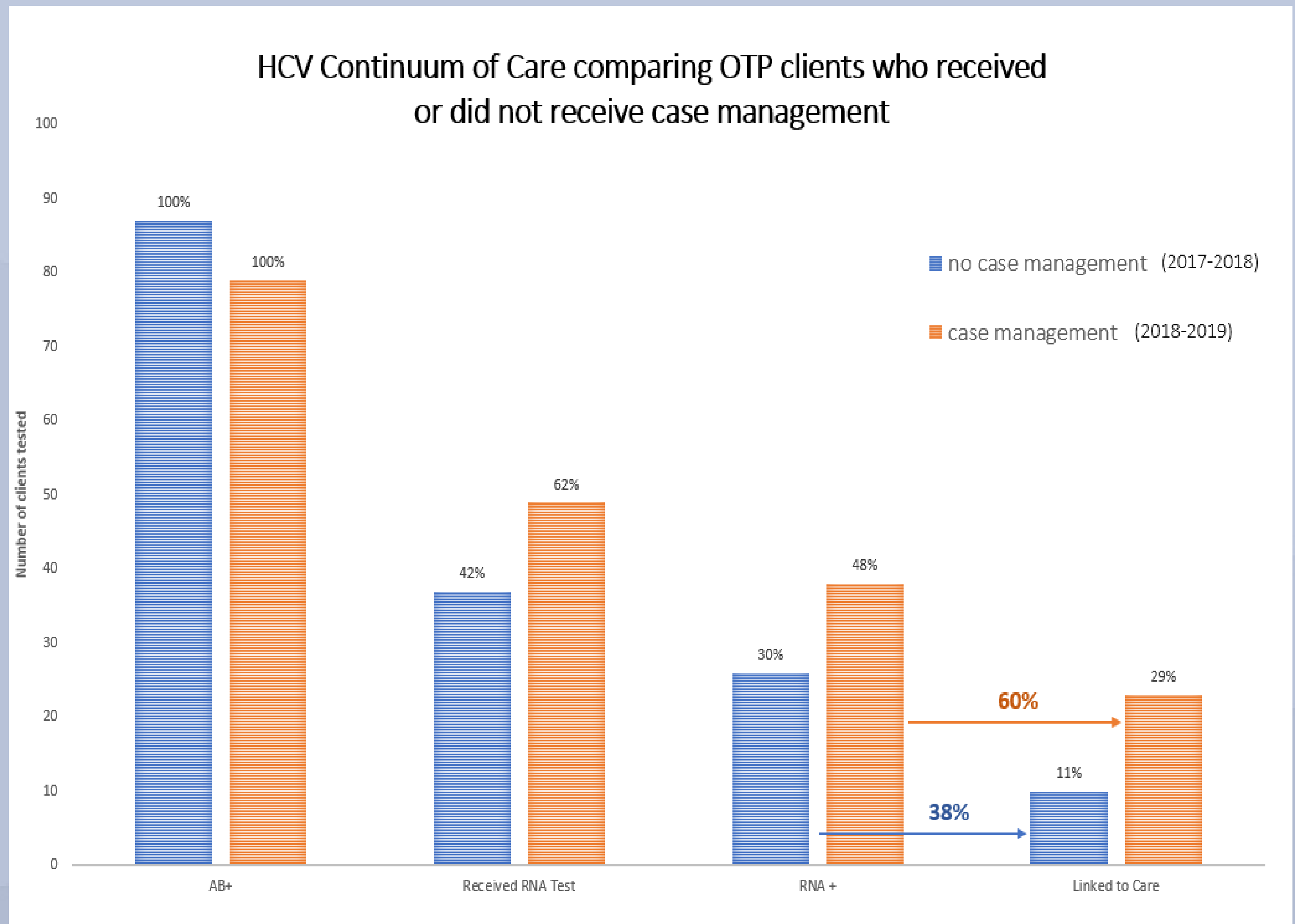
Unlike case management for HIV treatment, which has been widely studied and shown to be an effective, low-cost tool in linking people to treatment, case management for HCV treatment has yet to see widespread use. [6]

HCV case management onsite at OTP can greatly reduce the barriers to treatment and increase linkage to care rates for PWID.

Model of Care

Since 2013, HEP has partnered with Evergreen Treatment Services (ETS) to conduct HCV antibody (ab) testing. ETS is an OTP with 79% of its patients reporting a history of injection drug use.

Starting in July 2018, HEP placed an onsite case manager at ETS equipped to assist PWID navigate the HCV continuum of care. These case managers give HCV education and provide both onsite AB and RNA testing. Once diagnosed, RNA+ clients can immediately access insurance and treatment navigation, follow-ups and referrals to a wide range of other services.



Effectiveness

From July 2017-June 2018, before an outreach case manager was onsite:

- 159 antibody tests were conducted
- 55% of which were AB+.
- Of those, 42% got a RNA test.
- 70% of those were diagnosed.
- Of those diagnosed, 38% were linked to care.

From July of 2018-June 2019, with an outreach case manager onsite:

- 168 antibody tests were conducted.
- 47% of which were AB+.
- Of those, 62% had a RNA test.
- 78% of those were diagnosed
- Of those diagnosed 60% were linked to care.

Conclusions

Within the first 12 months of having onsite case management at ETS, antibody and RNA tests, along with diagnosis and linkage to care rates have all increased. By supporting HCV+ PWID at this OTP with case management, HEP has increased linkage to care rates in the first year.

As efforts to eliminate HCV increase, new models of care and streamlined services will be needed to make treatment more accessible to PWID. [7] HCV navigation by a dedicated onsite case manager at OTP's may prove to be a necessary component to increasing treatment accessibility to this population.

Outreach case managers help bridge the divide separating RNA+ PWID from treatment. By providing case management services at locations heavily accessed by PWID, linkage to care and ultimately cure rates will increase.

[1] Falade-Nwulia, O., Irvin, R., Merkow, A., Sulkowski, M., Niculescu, A., Olsen, Y., ... Mehta, S. H. (2019). Barriers and facilitators of hepatitis C treatment uptake among people who inject drugs enrolled in opioid treatment programs in Baltimore. *Journal of substance abuse treatment*, 100, 45-51.

[2] Judith I. Tsui, Claire M. Miller, John D. Scott, Maria A. Corcoran, Julia C. Dombrowski, Sara N. Glick. (2019) Hepatitis C continuum of care and utilization of healthcare and harm reduction services among persons who inject drugs in Seattle. *Drug and Alcohol Dependence*, Volume 195, 114-120.

[3] Edlin, BR, Kresina, TF, Raymond, DB, Carden, MR, Gourevitch, MN, Rich, JD, Cheever, LW, and Cargill, VA. Overcoming barriers to prevention, care, and treatment of hepatitis C in illicit drug users. (2015) *Infect Dis.*, 40, 276-285.

[4] Jordan, AE, Masson, CL, Mateu-Gelabert, P, McKnight, C, Pepper, N, Bouche, K, Guzman, L, Kletter, E, Seewald, RM, Des-Jarlais, DC, Sorensen, JL, and Perlman, DC. Perceptions of drug users regarding hepatitis C screening and care: a qualitative study. (2013) *Harm Reduct J.*, 10, 10-11. doi: 10.1186/1477-7517-10-10

[5] Carey, K. J., Huang, W., Linas, B. P., & Tsui, J. I. (2016). Hepatitis C Virus Testing and Treatment Among Persons Receiving Buprenorphine in an Office-Based Program for Opioid Use Disorders. *Journal of substance abuse treatment*, 66, 54-59.

[6] Gardner, Lytt Ia; Metsch, Lisa Rb; Anderson-Mahoney, Pamela; Loughlin, Anita Md; Rio, Carlos de; Strathdee, Steffanied; Sansom, Stephanie La; Siegal, Harvey Af, Jr; Greenberg, Alan Ea; Holmberg, Scott Dathe Antiretroviral Treatment and Access Study (ARTAS) Study Group (2005) Efficacy of a brief case management intervention to link recently diagnosed HIV-infected persons to care. *AIDS*, Volume 19, Issue 4, 423-431 doi: 10.1097/01.aids.0000161772.51900.eb

[7] Eckhardt BJ, Scherer M, Winkelstein E, Marks K, Edlin BR. (2015) Hepatitis C Treatment Outcomes for People Who Inject Drugs Treated in an Accessible Care Program Located at a Syringe Service Program. *Open Forum Infect Dis.* Apr;5(4) doi:10.1093/ofid/ofy048