DISPARITY AMONG MARGINALIZED PATIENTS IN THE HEPATITIS C CASCADE OF CARE IN A SPECIALIZED CLINIC?

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Background:

Since highly effective treatment to cure HCV infection is available now, we have to focus on our ability to deliver care and to accompany HCV-infected patient up to cure. cmuQL is a specialized HIV/HCV clinic with a holistic program of care, substitution program (SPO), community pharmacist, nursing and social worker follow up for persons with substance abuse. The aim of this study was to describe our HCV cascade of care and investigate the potential gape in our model of care.

Methods:

All patients with positive HCV antibody attending health services in cmuQL between 2010-2018 were included. HCV positive patients with ≥ 2 medical visits were considered to be linked in care. Lab data, medical follow-up, liver stiffness (biopsy/ultrasound/fibroscan), and treatment information were provided from the electronic medical chart (EMC). For patients with HCV re-infection or multiple treatments we considered only their last situation. Comparisons were done by $\chi 2$ and determinant of treatment initiation, going up to end of treatment and SVR were analyzed by logistical regression using SPSS.

Results:

Between 2010 and 2018, 1135 antiHCV+ patients received care at cmuQL. Of these 1100 (97%) were linked to care, 966 (85%) had an RNA test, 753 (66%) underwent liver fibrosis assessment, 77 (7%) cleared the virus spontaneously, 825 received treatment (73%) and 799 achieved SVR (70%). Neither HIV/HCV-coinfection (OR=0.76; 95%Cl=0.57-1.02) nor SPO (OR=1.07; 95%Cl=0.74-1.54) or gender (OR=1.06; 95%Cl=0.78-1.46) were barrier to access treatment or get cure at cmuQL.

Conclusion:

Analyses showed that in an HIV/HCV specialized clinic with substitution program and holistic care, maintaining patients into care and reaching cure could be successful. The largest gap in the HCV-care-cascade was seen in initiating treatment. Greater emphasis on linking patients to clinical evaluation and treatment is necessary in order to achieve the elimination of hepatitis C as a public health threat.

Disclosure of Interest Statement:

Machouf N, Huchet E, Poliquin M, Baril JG, Hamel A & Trottier B have been speaker for various pharmaceutical companies (Merck, Gilead, ViiV, BMS)

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