

Positively Hep

A multidisciplinary, incentivised Hepatitis C Project for disadvantaged communities

BACKGROUND

Chronic hepatitis C is a condition prevalent in people with a history of intravenous substance use. 2016 data indicates 80,700 people in New South Wales and 230,000 people around Australia are affected.

The PBS listing of direct-acting antivirals (DAA) in March 2016, changed the face of hepatitis C management and since then over 40,000 people have initiated treatment. However despite this, people from disadvantaged communities are poorly represented. This is frequently due to barriers in accessing mainstream health services.

Positively Hep seeks to address this by offering a multidisciplinary hepatitis C project within a trusted and accessible drug-user health setting.

MODEL

The **Positively Hep** intervention is a multidisciplinary hepatitis C project, delivered by the Needle and Syringe Program (NSP), in partnership with the Sexual Health and Liver Clinics at Nepean Hospital in outer western Sydney, NSW Australia.

It offers small monetary incentives (shopping vouchers) for a participants involvement in education, screening & testing for hepatitis C. Participants are encouraged to inform their communities about the new treatment options and refer peers to the service for screening and assessment.

Clinical staff provide healthcare through an informal walk-in service at the NSP, and those on treatment are monitored by staff with the added support of a peer worker.

AIMS

Positively Hep project aims to

- ✓ Engage known hepatitis C positive and high risk clients, in conversations and actions related to the new fast acting antiviral treatments for hepatitis C.
- ✓ Establish the NSP as an effective, accessible and client friendly one-stop hepatitis C treatment site, by providing a Nurse-led cascade of care approach to hepatitis C treatment.

EFFECTIVENESS

March 2016 – June 2018:

319 participants received the initial education regarding new treatment options for hepatitis C.
145 (45%) of these people were screened
71 (49%) tested positive for chronic hepatitis C.
32 (51%) of those positive, underwent elastography (FibroScan)
22 (35%) commenced treatment.
21 (95%) of those being treated in the NSP have completed their DAA regime

A further **12** participants have been referred to Specialist services for treatment due to the severity of their disease or co-infection.

1 person was lost to follow-up
1 person cleared HCV but has since re-infected.

CONCLUSION

An incentivised program for education, screening, support & treatment of hepatitis C is effective and has potential to reach at-risk individuals in disadvantaged communities.

Experienced and trusted NSP staff are able to use Nurse-led models of care in partnership with key stakeholders, to deliver an effective method of engaging high risk clients in the hepatitis C education and treatment journey.

AUTHORS

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 The authors declare no conflicts of interest

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