# UTILISING A PEER BASED INITIATIVE TO RECRUIT PATIENTS FOR HEPATITIS C TREATMENT IN A COMMUNITY NEEDLE AND SYRINGE EXCHANGE PROGRAM

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**Background:** Most people with hepatitis C who actively inject drugs have not been treated using the oral direct acting antiviral regimens. This is directly related to the vulnerability experienced by this hard to reach population. A nurse led hepatitis C treatment program offered treatment within a community needle and syringe exchange program.

**Methods:** Clients attending a needle and Syringe Exchange Program were informed about the new direct acting antivirals (DAA) oral therapies. A peer based initiative provided specific hepatitis C related information to inform and subsequently make client referrals to the health clinic. Pre-treatment assessment, on treatment management and follow up was undertaken by a nurse practitioner. Patients received treatment according to current Gastroenterological Society of Australia guidelines. Clinical outcomes were ascertained and self-reported compliance was assessed.

**Results:** Currently, 17 (70% male, median age at baseline 47) have commenced hepatitis C treatment.  All patients were treatment naïve. 70% were actively injecting at commencement of treatment, 30% had not injected for more than 12 months. Of the 17 people who initiated treatment, 3 people continue on the treatment program with 92% of the intention to treat (ITT) population reaching the end of treatment visit (EOT). Adherence was assessed every 4 weeks. An EOT response was achieved by 92% of the ITT population. Of those who have reached the 12 post treatment visit, 7 (100%) achieved a sustained virological response (SVR).

**Conclusion:** A nurse led, peer based model provides a point of connectedness to 1) engage clients, 2) reduce 'felt' and 'enacted' stigma and 3) reduce the burden of hepatitis C disease in this marginalised group.