

## TREATMENT OF HEPATITIS C IN A COMMUNITY BASED OPIOID SUBSTITUTION (OST) CLINIC

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### Background:

In 2017 an initiative to treat Hepatitis C in people who inject drugs (PWID) commenced in an inner city addiction clinic (n=234) dispensing OST onsite, catering for a deprived indigenous population, also serving Homeless Hostels (10). Delivery of the service was lead by a general practitioner in partnership with a Hepatitis C specialist nurse, pharmacist and GP service.

### Description of model of care/intervention:

A previous audit showed 67% to be Hepatitis C antibody positive, 80% of whom were PCR positive. Excluded were co infected with HIV (accounting for 20%), previously treated, organ transplant and decompensated liver disease. 45 were identified and offered a fibro scan on site. Six patients with a fibro scan of >12.5KPa referred to hepatology. 39 patients had a fibro scan <12.5KPa were suitable for treatment at the clinic.

A Complete medical and pharmacy review was under taken with their community GP and pharmacy. All patients had a full DDI evaluation.

A support group was set up with a local NGO, The Hepatitis C Partnership. This was facilitated by a project worker.

### Effectiveness:

30 patients completed treatment with appropriate DAA. All with a nil viral load. Treatment provided for Genotype 3 was Sofosbuvir™ / Velpatasvir™, genotype 1 was Viekirax™, Exviera™ /Ribavirin. Continued drug use was not a bar to treatment.

### Conclusion and next steps:

Effective treatment can be provided in a primary care OST Service

All patients treated to date have completed treatment with a nil viral load

Ongoing drug use did not affect treatment

Regular group meetings with the NGO improved programme delivery and individualised care proved extremely effective.

Miro-elimination has commenced within the geographical area.

### Disclosure of Interest Statement: *See example below:*

*None of the collaborators have received funding for this. No pharmaceutical grants were received in the development of this.*

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