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BACKGROUND & AIM

The uptake for **hepatitis C virus (HCV)** treatment in **people who inject drugs (PWID)** is low in Belgium. Previously, we used a **case management** methodology to improve the uptake for screening and treatment of HCV infection in the center for alcohol and other drugs (CAD) Limburg in 2015. We now studied whether these results could be repeated when case management was performed by a **nurse instead of a medical doctor**.

INTERVENTION

Prospective, ongoing cohort study since November 2016

Inclusion criteria:

PWID receiving opiate agonist therapy (OAT) at CAD Limburg

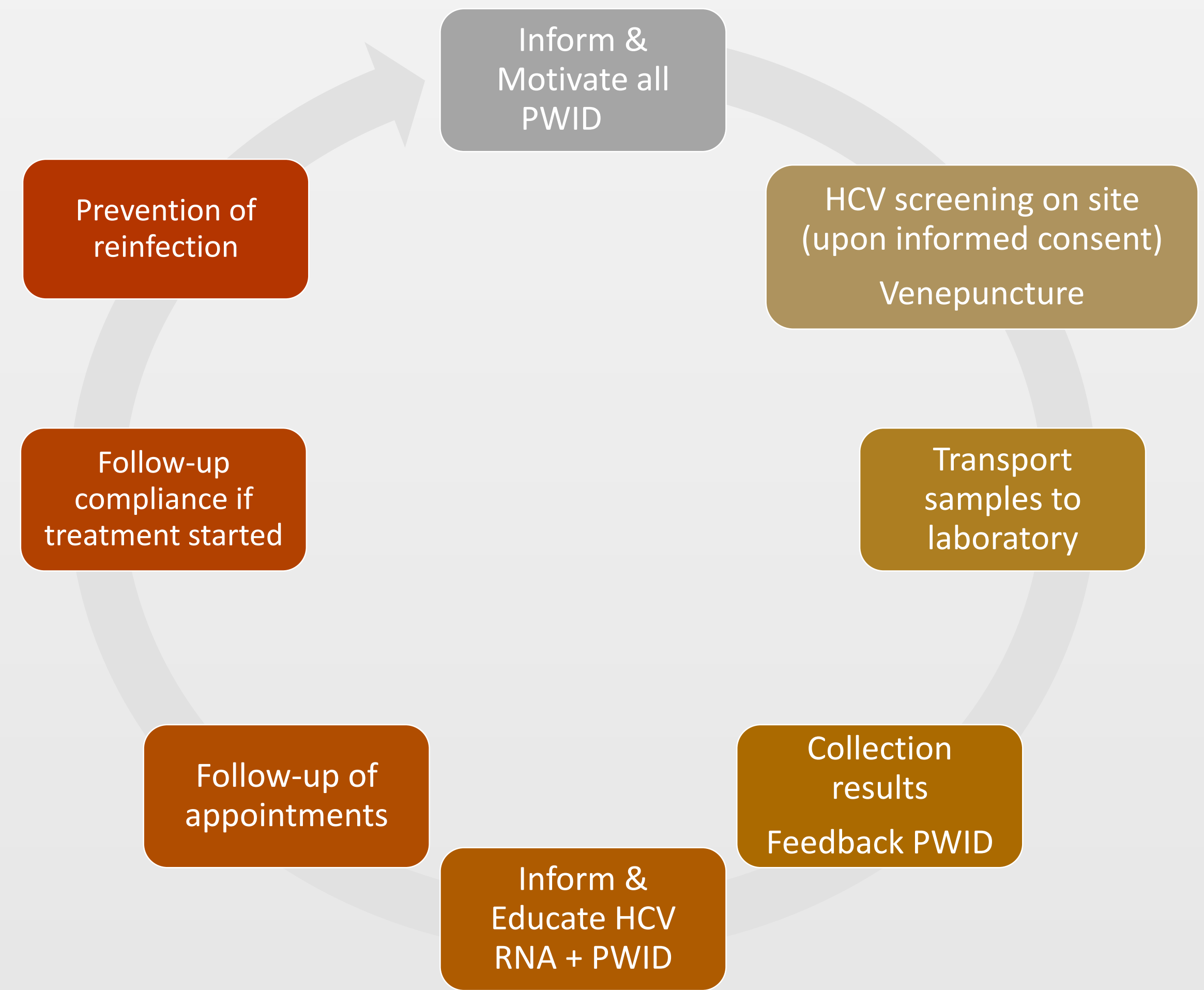
Objectives:

- To increase uptake for screening for HCV infection
- To increase linkage to care
- To increase uptake for treatment

Results compared to pilot project performed by medical doctor in 2015 (non-inferiority analysis)

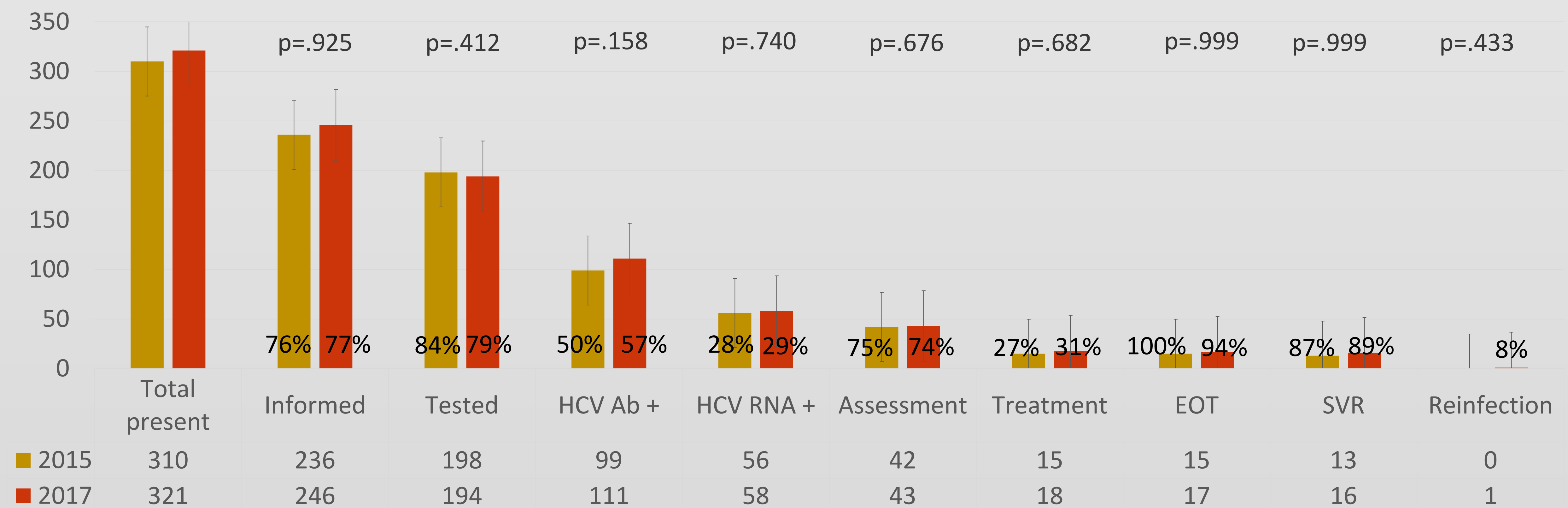
Differences with pilot project in 2015:

- Referral to all hospitals of the province of Limburg possible
- Change in reimbursement criteria: start treatment from stage F2



RESULTS

Comparison of cascade of care for PWID at CAD Limburg in 2015 (medical doctor) and 2017 (HCV nurse)



Changing landscape: 91 (28%) of the clients were new compared to 2015 and 81 (26%) were no longer in follow-up

	2015 (M.D.)	2017 (HCV nurse)	P-value
Total not tested	112/310 (36.1%)	127/321 (39.6%)	.307
Fear of needles/failed vene puncture	11 (9.8%)	19 (15.0%)	
Test by other GP	15 (13.4%)	8 (6.3%)	
Under treatment elsewhere	3 (2.7%)	6 (4.7%)	
Other priorities	4 (3.6%)	6 (4.7%)	
No reason	5 (4.5%)	9 (7.1%)	
Not informed	74 (66.1%)	79 (62.2%)	

	2015 (M.D.)	2017 (HCV nurse)	P-value
Total not treated	41/56 (73.2%)	40/58 (69.0%)	.305
No reimbursement in Belgium	19 (46.3%)	21 (52.5%)	
Medical comorbidity	2 (4.9%)	2 (5.0%)	
Psychosocial problems	6 (14.6%)	2 (5.0%)	
Prison	2 (4.9%)	6 (15.0%)	
Loss to follow-up	2 (4.9%)	-	
No assessment in hospital	10 (24.4%)	9 (22.5%)	

CONCLUSIONS

- Case management can be performed equally well by a HCV nurse as by a medical doctor.
- Rates of uptake for screening and linkage to care are high.
- This approach helps to identify the remaining gaps, and improvements like point-of-care testing and outreaching will be implemented next year.

DISCLOSURES & ACKNOWLEDGEMENT

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