

## **BARRIERS TO HEPATITIS C DIAGNOSIS AND TREATMENT IN THE DAA ERA: REVIEW OF THE LITERATURE AND RESULTS OF A COMMUNITY-BASED SURVEY OF PRIMARY CARE PRACTITIONERS**

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### **Background:**

Hepatitis C carries a significant burden in Canada and internationally, with recent estimates from the WHO placing it as a burgeoning public health threat by 2030. In Canada, a dichotomous screening and linkage to treatment gap problem curtails efforts to expeditiously reach HCV elimination goals. Furthermore, the complex epidemiology of HCV in Canada (IVDU and former IVDU population, immigrant populations, and regional/provincial heterogeneity characteristics) muddle a uniform nation-wide diagnosis and treatment plan. Notwithstanding these variables, the onset of oral direct-acting antiviral (DAA) therapy regimens afford highly effective, safe treatment options. However, accessibility to DAA in the 10 provinces remains suboptimal.

### **Methods:**

We sought to study the barriers to linkage to care and access to care using a survey-based study. Specifically, we evaluated 1) primary care providers' (PCP) knowledge of specialist treatment options and the importance of treatment; and 2) patient factors, including transportation, linguistic barriers, and other socioeconomic status indicators. Broader governmental issues, including funding streams (parallel private and public factors) were investigated.

### **Results:**

The survey was distributed to PCPs in Brampton, Ontario, offering a unique multiethnic community deployment. Particularities of the municipality include lower socioeconomic status and language fluency. Our preliminary results indicate that there are physician-level (knowledge and familiarity with DAA regimens, awareness of specialist treatment options, lack of collaborative PCP-specialist treatment models) and patient-level (health literacy, sociocultural) barriers that significantly impact HCV diagnosis and treatment.

### **Conclusion:**

Our study offers insight into the barriers in diagnosis and treatment of HCV on the part of PCPs in a multi-ethnic community setting. An incentivized screening and referral program may provide a solution to addressing such barriers. Public health campaigns should aim to improve targeted screening.