A MULTI-SECTORAL MODEL TO SUPPORT HEPATITIS C TESTING AND TREATMENT ACCESS AMONG PEOPLE WHO INJECT DRUGS IN HANOI, VIETNAM

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Background:
In Vietnam, testing and treatment uptakes remain very limited. HCV prevalence rates in the general population and among people who inject drugs (PWIDs) are estimated to be as high as 4.3% and 97.2% respectively. We describe a peer support model to increase HCV awareness, testing, and referral to treatment among PWIDs, in Hanoi, Vietnam.

Approach:
A team of 15 peer workers of five PWIDs community-based organizations was trained to integrate HCV sensitization in their outreach work and raise awareness and interest in HCV testing and treatment. Initial screening and pre-counseling was done in outreach and PWIDs were referred to a PWID-friendly outpatient clinic of Hanoi Medical University (HMU) where they were navigated by a peer worker. Services provided at the clinic included HIV and HCV rapid test, HCV viral load, fibrosis assessment, counselling and referral. Patients were requested to come back after three days for confirmatory results and additional counseling. PWIDs with a chronic infection were tested for HBV antibodies and referred for short-scheme vaccination.

Outcome:
Between February 2016 and April 2017, 844 PWID were screened at HMU. Of those, 100% received HCV testing, fibrosis assessment and counseling. 73% came back for results. Of the 305 patients referred to HBV vaccination, 74% completed the schedule. Infection rates were 61.7% with a 39.1% HCV/HIV co-infection rate, 18% of the HCV chronic patients demonstrated a sever fibrosis of F3 or above.

Conclusion:
Peer support throughout the process has insured low loss to follow-up and high rate in completed HBV vaccination. Next steps include complementing the model of care with a peer-based treatment intervention for 100 PWIDs.

Disclosure of Interest Statement:
The authors declare no conflict of interest.