

RAPID POINT OF CARE HCV TESTING ALLOWS HIGH THROUGHOUT HCV SCREENING AND RAPID TREATMENT UPTAKE AMONG PWID ATTENDING A MEDICALLY SUPERVISED INJECTING ROOM

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Background:

To achieve WHO HCV elimination targets, efforts must focus on developing novel models of care that engage PWID in HCV screening and treatment. We aimed to assess the feasibility of Xpert® HCV fingerstick point of care (POC) testing, which provides a HCV RNA result within 1 hour, in PWID attending a supervised injecting room (SIR) in Melbourne, Australia.

Description of model of care/intervention:

We recruited PWID attending a high-volume SIR across a 9-week period. Clients underwent HCV screening using Xpert® HCV fingerstick POC testing, as well as venepuncture for HBV/HIV screening, and liver elastography for fibrosis assessment. HCV RNA results were returned the same day where possible. HCV treatment was prescribed immediately upon return of a positive result, and medication dispensed within 30 minutes and couriered to the SIR. Clients commencing treatment will be followed up 4-weekly during treatment, and at SVR12. Reimbursements were offered at study enrollment, treatment commencement and each follow up visit. Comparison was made to a historical control period of standard of care (SOC) venepuncture testing.

Effectiveness:

228 PWID consented to POC testing. By comparison, 61 clients underwent SOC venepuncture testing during the same time period 12-months prior (274% increase with POC). Median age was 43yrs (IQR 38-48), 78% were male and 23% identified as Aboriginal and/or Torres Strait Islander. 9 (4%) had cirrhosis. HBV and HIV co-infection rates were 2% and 3%, respectively. 64 (28%) returned a positive HCV RNA result; 61 (95%) were informed of their positive result, with most (66%) receiving their result on the same day. 57/64 (89%) of HCV RNA positive clients commenced DAA therapy; 13 (23%) started treatment on the same day as testing.

Conclusion and next steps:

SIR's service a high volume of marginalised PWID with risk factors for HCV. Our streamlined, real world model of care using fingerstick POC testing rapidly engages large numbers of PWID in HCV screening and successfully links clients to treatment.

Disclosure of Interest Statement: *See example below:*

The authors recognise the considerable contribution that industry partners make to professional and research activities. In order to facilitate this study, the GeneXpert machines were funded by Gilead Sciences. We recognise the need for transparency of disclosure of potential conflicts of interest by acknowledging this relationship in publications and presentations.