

# Combined COVID-19 vaccination and hepatitis C virus screening intervention for high-risk populations at a centre for addiction services in Barcelona, Spain

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## Background

COVID-19 has hindered efforts to address the hepatitis C virus (HCV) by reducing testing, particularly in marginalised groups, who have some of the highest rates of HCV and lowest rates of COVID-19 vaccination.

## Description of model of care/intervention

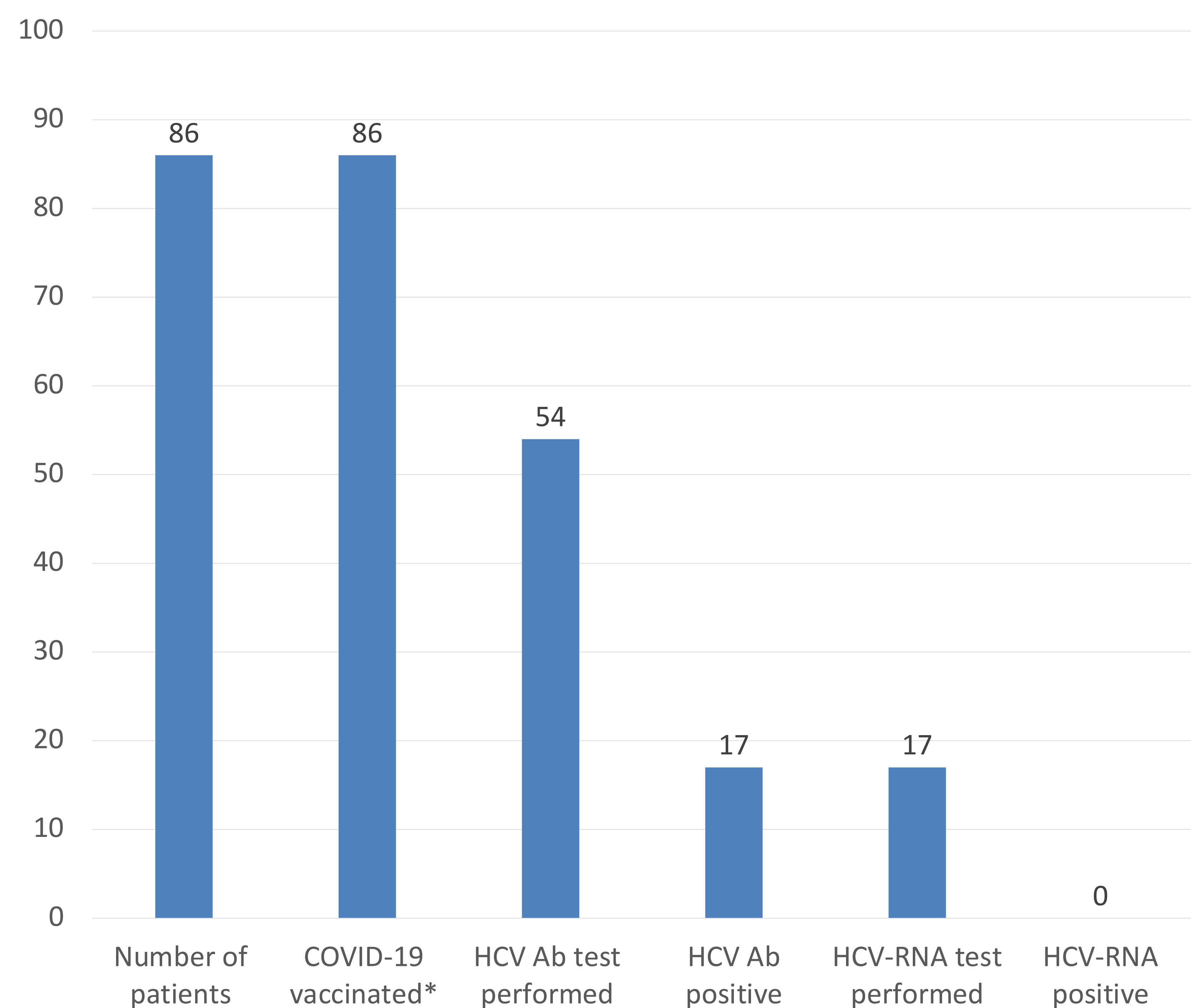
This pilot study explored the acceptability of combining HCV testing with COVID-19 vaccination in a centre for addiction services in Barcelona, Spain. From 20/1/2022 to 30/6/2022, 86 individuals with substance use disorders were invited to get the COVID-19 vaccine along with HCV antibody (Ab) screening. If HCV Ab+, they were screened for HCV-RNA. If HCV-RNA+, patients would be offered linkage to care.

## Effectiveness

Of the 86 participants:

- 76.7% were male and 84.9% Spanish-born
- The mean age was 47 (SD: 10.1)
- 32.6% were unemployed
- 26.7% had an incarceration history
- 46.5% had multimorbidity
- 32.6% had a past HCV infection, of which 96.4% reported that the most likely route of transmission was injecting drug use
- 15.1% had a previous COVID-19 diagnosis
- 93.0% had been vaccinated for COVID-19, of which 90.0% had received the full first round schedule but none had received a booster
- Everyone received a COVID-19 vaccine without any identified adverse events (Figure)
- 62.8% were tested for HCV Ab, of which 31.5% were positive
  - Of those HCV Ab+, all were tested for HCV-RNA and none were positive

**Figure.** Analysis of the combined COVID-19 vaccination and HCV screening intervention in people with substance user disorders at the centre for addiction services in Barcelona



\*Vaccinated during the study intervention.

Abbreviations: Ab, antibody; HCV, hepatitis C virus.

## Conclusion and next steps

The combined intervention had an acceptability rate of 62.8% and was considered safe, as no adverse events to HCV testing were reported. It also optimised the use of time, as participants were tested for HCV during the post-vaccination waiting period and it prevented the need for multiple visits. This novel model of care demonstrated the effectiveness of co-locating HCV screening with COVID-19 vaccination for marginalised communities.

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