

Innovative community-based strategy to eliminate HCV among people who inject drugs in Vietnam

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Background: Elimination of HCV among people who inject drugs (PWID) requires innovative strategies that encompass the whole screening, care and prevention pathway. We aimed to assess the efficiency of a strategy consisting of community-based respondent-driven sampling (RDS) survey as mass screening, together with simplified hospital-based care and prevention of reinfection supported by community-based organisations (CBO) in Haiphong, Vietnam.

Methods: Adults currently injecting heroin were eligible to participate in a RDS survey implemented in two CBO offices, where participants were screened for HCV. Those with detectable HCV RNA were referred to local clinics in three public hospitals. Patients were treated with 12-week sofosbuvir/daclatasvir, plus ribavirin if cirrhosis, and followed-up 12 and 48 weeks post-treatment. Using a case-management approach, CBO members provided harm reduction counselling, support for linkage to and retention in care, and treatment adherence support. The primary endpoint was the rate of HCV cure at 48 weeks.

Results: Among the 1344 RDS survey participants, 875 had detectable HCV RNA. Median age was 44 years, 96% were male, 44% were on methadone and 36% were HIV-infected. Overall, 78% of participants started HCV treatment and 92% had confirmed sustained virological response at 12-weeks post-treatment (SVR12). At week 48, 96% of participants who attended the visit were cured. Among PWID identified with HCV RNA at RDS survey, 66% (95%CI: 63-69) were cured at 48 weeks. After SVR12, the reinfection rate was 4/100 person-years (95%CI: 2-7). Younger age (<36 years), no regular place to stay, not holding a health insurance card (not required for treatment), and not being engaged in either addiction or HIV care were independently associated with not having initiated sofosbuvir/daclatasvir.

Conclusion: This community-based strategy, addressing all steps from mass HCV screening in the community to care and prevention of reinfection, stands as a promising tool to reach HCV elimination among PWID.

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