

## **OUTCOMES FOR CHRONIC VIRAL HEPATITIS TREATMENT AND CONTROL, 10 YEARS DATA FROM THE FIRST HARM REDUCTION APPROACH OST CENTER FROM BUCHAREST**

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### **Background:**

Even Romania is an EU country since January 2007, we still didn't manage to ensure places for opioid dependence substitution treatment (OST) for at least 20% of the estimated problematic IDUs (PWID), or enough syringes through needle exchange programs (NEP), hence we have more than 80% prevalence of HCV virus among IDUs.

Description of model of care: In June 2007 ARAS and NIIDMB through a public private project opened the first low threshold OST center in Bucharest where were located almost 95% of the PWID in Romania. After 10 years we are treating monthly more than 500 patients (40% of the OMT patients) offering integrated services. We had 2155 unique patients, 1654 men (76,7%) and 501 woman (23,3%). 79% of the patients had recent analyses (less than 12 month) at OST entry, knowing their HCV HBV and HIV status and 28% were treated with Peg-IFN + Ribavirin. In 2016 we were able to extensively test 100 of our new admitted patients for hepatitis and HIV, testing for fibrosis, viral loads, genotype and IL 28. We are comparing below the results in HCV and HBV treatment before and after the new DAA introduction.

### **Effectiveness:**

At entrance in treatment 54% of the patients declared they know they have HCV and 7% HBV, after rapid testing within 3 months from admittance in OST 69% prove to be HCV positive and 7% HBV. 95% have F0-F2 fibrosis, but 61% had positive viral loads. 92% were Genotype 1b and 32% were CC for IL 28.

### **Discussions:**

Because of low fibrosis many HCV viremic IDUs patients are not eligible for DAA treatment yet. However 21 patients have bought the "generic" treatment and all have SVR. Due to our services many patients got ID papers and were linked and could access medical services.