

COMMUNITY CENTRIC HCV TESTING AND TREATMENT FOR PWID IN MANIPUR, INDIA- THE HEAD START PROJECT.

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Background: In Manipur, a North-Eastern state of India, high prevalence of HCV due to injecting drug use is well documented. Furthermore, lack of an established HCV care in the public sector, makes access to diagnostics and treatment very challenging in this hill state.

Description of model of care/intervention: To address these gaps, FIND in collaboration with YRG CARE has launched a decentralized HCV care for high risk groups in Manipur, India. In this demonstration study, screening for HCV is being performed using rapid diagnostic tests (RDTs) at four integrated care clinics (ICCs) where opioid substitution therapy (OST) is provided, and confirmation of infection is being carried out using GeneXpert at 2 sites. Decentralised free of cost treatment is also being offered at both the OST and Xpert sites. The proportion of participants that complete each step in the HCV care cascade will be assessed as part intervention.

Effectiveness: Between January-March 2019, 1554 PWIDs (7% female and 93% male) have been screened at OST sites with the median age being 33 years, and 807 (52%) of those tested found anti-HCV positive. Of those who were found HCV sero-positive, 658 (82%) were successfully referred for confirmatory testing out of which 530 (66%) were HCV RNA positive on Xpert. Within those with confirmed HCV infection, 33% were coinfecting with HIV and a total of 360 (68%) of those with confirmed HCV infection were initiated on treatment.

Conclusion and next steps: A hub and spoke model of HCV testing using RDT screening at OST sites and referral for confirmatory testing using Xpert has demonstrated good retention of PWID in the HCV care cascade in Manipur. Outcomes of this study are expected to scale up of the model within Manipur and provide data for replication in other states of India and the Asia Pacific region.