

## RARE HCV RE-INFECTION AFTER DAA TREATMENT IN AN INTEGRATED ALL-UNDER-ONE-ROOF CARE SETTING

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**Background:** Treating people who inject drugs (PWID) is crucial to achieve the WHO goal of hepatitis C (HCV) elimination. After successful treatment, this population remains at risk for re-infection. We show real life data about re-infection incidence after HCV treatment with DAAs in an integrated care setting of a low-threshold opioid agonist treatment (OAT) in Switzerland, where - beside full range of medical and social care –prevention-measures like sterile injection paraphernalia dispensation and peer-education are provided.

**Methods:**All patients with a diagnosis of opioid or stimulant use disorder and an observational period of a minimum of 24 weeks after SVR following HCV DAA treatment have been included in this retrospective analysis. Results of HCV RNA tests after SVR and the time-period of re-infection surveillance have been assessed during July 2014 und January 2018.

**Results:**57 patients were included (77% male, mean age: 48 years). 97% were in OAT, 2% had a stimulant use disorder. Additional substance use disorders (cocaine: 46%, alcohol: 40%), and advanced liver disease (25%) were prevalent. Lifetime injection drug use has been reported for 24 patients (42%). In total follow-up period of 98.88 years (min. 0.51, max. 3.43, median: 1.66) 1 HCV re-infection occurred resulting in 1 re-infection per 100 person-years.

**Conclusion:** HCV re-infection after DAA treatment in an integrated care setting also offering prevention measures was rare. HCV follow-up care for PWID in an all-under-one-roof setting has the potential to prevent re-infection and therefore contribute significantly to the WHO goal of HCV elimination.

**Disclosure of Interest Statement** PB has served as advisor and speaker for, and has received project, travel and research grants from Merck, AbbVie, Gilead and Mundipharma. CB has received travel grants from Abbvie and Gilead. LF and NS have no conflicts of interest to declare.