



## HOW DO WE REACH THE OTHER 75% OF PEOPLE WITH UNTREATED CHRONIC HEPATITIS C?

### The reality of working with people who inject drugs



- Not all stereotypes are true
- Not all media reports are true
- What you put into the relationship is what you will get out (if you are disrespectful or judgemental then your patient will respond in the same way)
- Take time to build rapport – (be friendly, concerned and non judgemental)
- Not every health issue will link back to drug use

### Background

Connecting with people who inject drugs (PWID) requires a tailored approach. Hepatitis C remains untreated in the majority of PWID. With the availability of the Direct Acting Antivirals for treatment of hepatitis C, a health clinic operating within a Needle and Syringe Exchange Program provided an opportunity to engage with this difficult to reach group. A collaborative study between Peer Based Harm Reduction WA (PBHRWA) and the University of Western Australia (UWA) was conducted during 2017 and 2018.

### Methods

Ethical approval to conduct the study was obtained from UWA. The first part of the project included a retrospective audit of 1074 clinical files. The second part of the project, a prospective study recruited hepatitis C positive clients interested in undertaking hepatitis C treatment. Questionnaires and survey instruments were adapted and self-administered to patients at baseline, end of treatment and at 3 months post-treatment. A focus group was conducted involving 10 individuals who had successfully completed treatment. A HCV peer worker provides support during the treatment program.

### Results—Retrospective Audit

#### Baseline Characteristics



58% male

75% currently injecting in past 12 months

70% of participants are greater than 30 years old



25% HCV Positive  
75% HCV Negative

### Results—Ongoing Prospective Study

10 clients participated in the study.  
100% SVR Rate.  
SF12 showed an overall increase in physical and mental health over the 6 month treatment and follow up period. There was no decrease in injecting behaviour.

### Results—Focus Group

The most important emerging theme was education including information about:

- The risks associated with not being treated;
- Specific information about the NEW treatments and the fact that the treatment is 'NOT INTERFERON'; and,
- Typical media campaigns are not effective in reaching PWID.

Another important emerging theme was that when patients attended PBHRWA they felt more comfortable and felt free from judgement and discrimination.

### Conclusion

This study demonstrates that agencies who connect with PWID are in a prime position to offer alternative models of care. Education campaigns need to be targeted and specific to PWID. Peer workers are integral to accessing new patient populations.

PEER BASED HARM REDUCTION WA

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