

# IMPROVING ENGAGEMENT WITH HEALTHCARE IN HEPATITIS C: A RANDOMISED CONTROLLED TRIAL OF A PEER ADVOCACY INTERVENTION

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## **Background:**

Directly acting antivirals for chronic hepatitis C infections have radically improved the treatment experience but concerns about engagement with treatment have limited patient access. Chronic hepatitis C is often associated with marginalised populations who can struggle to engage with healthcare services. Peer Advocacy is a mechanism to enable active engagement and increase the likelihood of favourable treatment outcomes. In this randomised controlled trial, the efficacy of a Peer Advocacy intervention at promoting successful engagement with clinical services for chronic hepatitis C was assessed.

## **Approach:**

In London, UK, potential participants were offered point-of-care testing for hepatitis C virus (HCV), at outreach services for problematic drug use and homelessness. Individuals testing positive for Hep C, were randomised to receive either intervention or standard care. Individuals allocated to the intervention were assigned a Peer Advocate to aid their navigation of the chronic hepatitis C healthcare pathway. The primary outcome of interest was successful engagement with clinical services, defined as three engagements within six months of the first booked appointment. Absolute differences in the proportion of participants reaching a successful outcome in the intervention and control arms were calculated using a generalised linear model. The results of this model were compared to that of a logistic regression model.

## **Outcome:**

364 individuals consented to participate in the study. 136 had a positive point-of-care test for HCV. 101 individuals had chronic hepatitis C. Of these, 63 individuals were randomised to receive the intervention. In the Peer Advocate arm there was an 18.09% increase in the likelihood of a successful outcome versus the standard of care arm (95% confidence interval 0.96%-35.21%, p-value=0.04). This was mirrored in the logistic regression (odds ratio 2.55 (0.97-6.70), p=0.06).

## **Conclusion:**

Peer Advocacy can improve the engagement of patients with chronic HCV with healthcare services.

## **Disclosure of Interest Statement:**

None