

Improved linkage to Hepatitis C assessment and treatment within community drug services through combined Hepatitis C and Opiate Substitution Treatment (OST)-prescription appointments

Authors: Cassell M^{1,3}, Ashby F², Hutchinson J², Sathyanarayana V¹, Kapur K¹, Stone B³

¹ Barnsley Hospital NHS Foundation Trust, UK, ² Burleigh Court, Barnsley, UK, ³ Sheffield Teaching Hospitals NHS Foundation Trust, UK

Background:

In spite of improved access to direct-acting antivirals (DAAs), the attendance of patients with hepatitis C (HCV) infection (HCV RNA detected) to Barnsley Hospital outpatient clinic appointments was poor.

From August 2016 to July 2017, of **194 new referrals** into the hospital outpatient clinic:

- **111 (57.2%)** failed to attend for their first appointment
- **83 (42.8%)** attended their first appointment only
- **44 (22.7%)** engaged and commenced treatment
- 80% of referrals originated from one single local drug service

Aims:

- To improve attendance, engagement and HCV treatment uptake in clients with HCV infection attending the Barnsley Drug Service for OST
- To establish and offer in reach HCV service within the drug service
- To simplify HCV assessment and treatment patient pathway

Methods:

- One day per week HCV assessment and treatment clinic established and conducted within drug service
- Delivered by Barnsley Hospital Liver Clinical Nurse Specialist (CNS)
- All HCV RNA-detected client referred
- First appointment: history, examination, bloods, fibrosis assessment (+/- hospital AUSS if F3-4)
- Regional multidisciplinary team treatment approval
- Second appointment: HCV treatment start

Intervention Phase 1 (initial 3 months):

- Co-localised HCV assessment and treatment clinic within Drug Service
- **Separate to OST prescription appointment**

Intervention Phase 2 (subsequent 12 months):

- As for Intervention Phase 1, **BUT ALSO**
- **Combined HCV assessment / treatment and OST prescription appointments**
- Liver CNS sat in on OST appointment with drug worker and client
- OST appointment time extended to accommodate HCV assessment
- DAA prescriptions issued 4-weekly to coincide with 4-weekly OST prescription issue throughout HCV treatment course

Results:

	Number of referrals (N)	Number attending for HCV assessment (% N)	Number initiating HCV treatment (% N)
Baseline	194	83 (42.8)	44 (22.7)
Phase 1	59	33(56.0)	26 (44.0)
Phase 2	86	76(88.3)	75 (87.2)

Of 101 clients initiating HCV treatment within Drug Service: **82 (81.2%) completed treatment** (SVR12 data pending); 8 remain on treatment; 8 disengaged before end of treatment; 2 had virological failure; and 1 died.

Conclusion

Facilitating attendance of HCV RNA-positive clients on OST via combined HCV/OST appointments improves attendance & engagement in and onto treatment for HCV