

## **HEPATITIS C VIRUS (HCV) SCREENING IN PEOPLE WHO USE DRUGS (PWUD): WHAT YOUR PATIENTS WANT YOU TO KNOW**

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### **Background:**

PWUD remain underrepresented among those who have been evaluated and treated for HCV. Patient-level barriers and facilitators to HCV care among PWUD, especially in relation to HCV screening, are poorly described in the literature. Programs linking opioid substitution therapy (OST) and HCV treatment present valuable opportunities to examine patient-level factors that deter or motivate interest in HCV care.

### **Methods:**

To better understand patient-level barriers and facilitators to HCV screening, physician-led individual semi-qualitative interviews were conducted in current and former illicit substance users (target N=75) receiving OST care in Toronto, Canada. Themes were subsequently identified utilizing qualitative content analysis.

### **Results:**

Of the 35 patients interviewed to date (mean age 45 years, 83% male), 46% reported illicit substance use within the past 30 days, and 71 % self-identified as having a history of mental illness (60% with depression, 63% with anxiety disorders). No patients had any HCV screening results on file at enrollment.

More than 80% of patients believed it is important to have “clean” urine drug screens or to be sober from alcohol use prior to HCV evaluation. Other reported barriers included challenging venous access, complicated screening process and low self-perceived risk for HCV infection. 100% of patients indicated that OST providers urging HCV testing would be an important motivator. Other reported facilitators included “reduced anxiety” associated with knowing one’s HCV status, changes in health status and a simplified screening process.

### **Conclusion:**

Our preliminary analysis suggests misconceptions among PWUD regarding eligibility for HCV care may contribute to perceived barriers with the screening process. Our findings further suggest that OST providers are well-positioned to engage PWUD in HCV screening. In light of the high burden of mental illness in our cohort, further research is warranted to evaluate the impact of depression and anxiety on HCV screening in PWUD.

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