

FACTOR ASSOCIATED WITH ENGAGEMENT IN HEPATITIS C VIRUS CASCADE OF CARE AMONG PEOPLE WHO INJECT DRUGS IN IRAN

Authors:

Mehrdad Khezri^{1,2}, Ali Mirzazadeh^{1,3}, Mostafa Shokoohi¹, Heidar Sharafi^{1,4}, Nima Ghalekhani¹, Fatemeh Tavakoli¹, Soheil Mehmandoost¹, Ali Akbar Haghdoost¹, Willi McFarland³, Mohammad Karamouzian^{1,5}, Hamid Sharifi¹

¹ HIV/STI Surveillance Research Center, and WHO Collaborating Center for HIV Surveillance, Institute for Futures Studies in Health, Kerman University of Medical Sciences, Kerman, Iran, ² Department of Epidemiology, New York University School of Global Public Health, New York, NY, USA, ³ Department of Epidemiology and Biostatistics, University of California San Francisco, San Francisco, CA, USA, ⁴ Research Centre, Centre Hospitalier de l'Université de Montréal (CRCHUM), Montréal, Québec, Canada, ⁵ Centre on Drug Policy Evaluation, Saint Michael's Hospital, Toronto, ON, Canada

Background: Understanding the hepatitis C virus (HCV) cascade of care (CoC) and factors associated with engagement is crucial for designing interventions for elimination programs. However, data on engagement in the HCV CoC among people who inject drugs (PWID) in the Middle East and North Africa remains limited. We examined the HCV CoC and factors associated with testing among Iranian PWID.

Methods: We recruited PWID in 11 cities in Iran using respondent-driven sampling in 2020. PWID completed structural interviews capturing measures on socio-demographics, behaviors, and HCV CoC. We examined the number and proportion of individuals who self-reported ever: tested for HCV, tested positive for HCV antibody, diagnosed with HCV, initiated HCV treatment, and achieved sustained virologic response (SVR).

Results: Of 2,684 PWID, the mean age was 40.2 (SD 9.2) years, and 90 (3.4%) were women. Overall, 321 (12.0%) had ever tested for HCV, 106 (4.0%) had tested reactive for HCV antibody, and 99 (3.7%) had received HCV diagnoses. Of diagnosed cases, 44 (44.4%) were linked to care, 15 (15.2%) initiated treatment, and 3 (3.0%) achieved SVR. HCV antibody testing was significantly higher among PWID who reported \geq high school education than <high school (adjusted odds ratio [aOR] 1.33; 95%CI 1.02, 1.74), injecting in private places than public places (aOR 1.42; 95%CI 1.09, 1.86), lower frequency of injection than daily injection (aOR 1.90; 95%CI 1.44, 2.50), never experiencing stigma within healthcare settings (aOR 1.75; 95%CI 1.31, 2.34), and tested positive for HIV (aOR 7.26; 95%CI 4.46, 11.82).

Conclusion: We found a considerably low engagement in HCV CoC among PWID in Iran. As the first point of entry into the HCV CoC, testing programs need to reach PWID not engaged in services, particularly those involved in high-risk injection practices and those who experienced stigma in healthcare settings, to strengthen HCV elimination efforts in Iran.

Disclosure of Interest Statement: The authors have confirmed they have no potential conflicts of interest to declare.