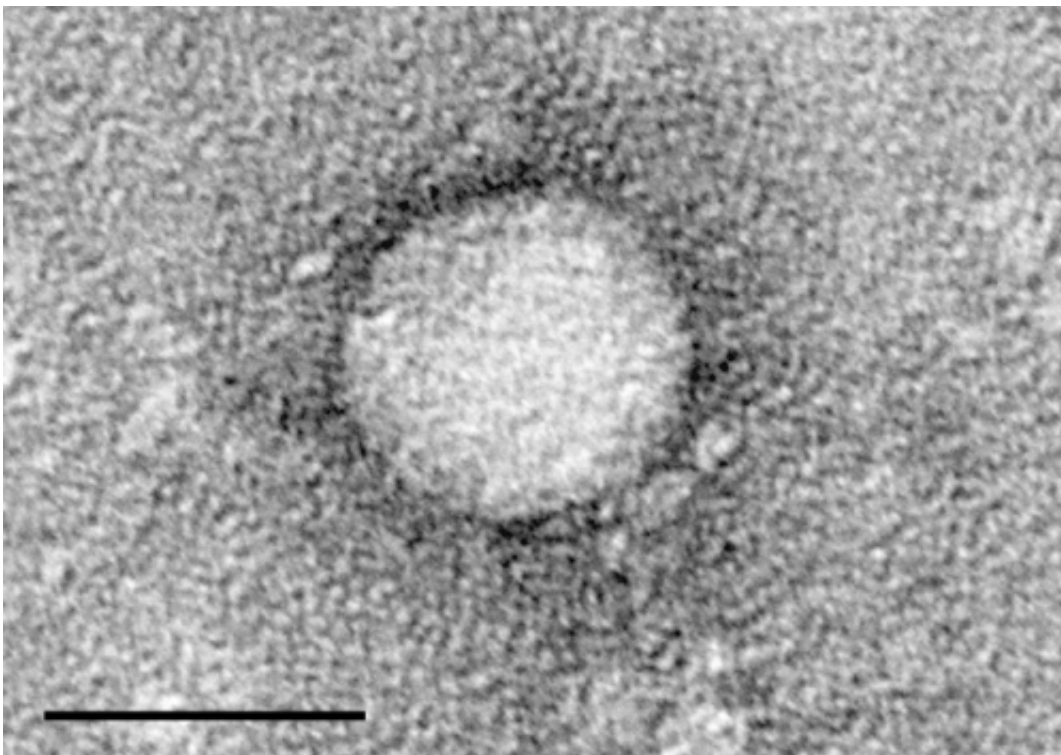


# Linkage to care specialist facilitates access to hepatitis C treatment for people who inject drugs

April 12 2018

---



Electron micrographs of hepatitis C virus purified from cell culture. Scale bar is 50 nanometers. Credit: Center for the Study of Hepatitis C, The Rockefeller University.

A prospective, longitudinal study involving more than 1,000 people who inject drugs has identified a promising role for linkage to care specialists

in facilitating rapid access to hepatitis C treatment. The study, which was conducted in Texas, USA, ensured that individuals newly diagnosed with hepatitis C were contacted by a linkage to care specialist within 48 hours of being referred to the service, thereby ensuring that almost 50% of patients referred to a medical practitioner made it to their first appointment and that 60% of those seen were initiated on treatment.

"We have a major problem with injection drug use in the USA," explained Zohha Alam from the Austin Hepatitis Center in Texas, USA. "At least 75% of new [hepatitis](#) C virus (HCV) infections result from injection drug use, and it is often difficult to engage with the users and ensure that HCV infection is both diagnosed and treated."

The prospective study, which was presented today at The International Liver Congress 2018 in Paris, France, evaluated 1,038 patients who were screened and entered into an electronic database in Austin between January and October 2017. A total of 503 individuals were found to be HCV RNA positive and were referred to the linkage to care service. Of those referred, 398 (79%) were contacted within 48 hours by a linkage to care specialist who provided education and linked the individual to a care provider. Of the 249 individuals referred to a medical practitioner, 116 (47%) attended their first appointment, and 69 (59%) had initiated HCV therapy at the time of the analysis.

"Linkage to care is the missing link in the treatment of chronic HCV infection," said Zohha Alam. "Our study demonstrates a promising role for linkage to care specialists in engaging with people who inject drugs and, importantly, connecting those individuals with HCV care providers."

The importance of increasing the number of HCV-infected individuals screened and linked to care was highlighted in another study presented at The International Liver Congress 2018. The study by a team from the

CDA Foundation's Polaris Observatory in Lafayette, Colorado, USA, used data from 53 countries in Europe to forecast the current and future burden of HCV in the region and to estimate the levels of HCV diagnosis and treatment required to achieve World Health Organization (WHO) Global Health Sector Strategy Goals for Hepatitis by 2030.<sup>1</sup>

"Based on our analysis," said Sarah Robbins from the Polaris Observatory, 'we predict that given the current standard of care for the next 15 years, the total HCV-infected population in Europe would increase by an estimated 1% by 2030 and that, in order to meet WHO goals, the number of individuals diagnosed annually would need to increase to at least 800,000 by 2022, with 900,000 being treated each year by 2025. Improving linkage to care coupled with increased access to DAA therapy is needed to achieve such goals."

Unfortunately, progress towards establishing national policies to support the necessary scale-up of HCV diagnosis and treatment to achieve these goals remains slow, according to the results of a third study presented in Paris. The 2017 Hep-CORE study, which was conducted in 25 European countries, found that an approved national hepatitis C strategy and/or action plan was in place in just 12 (48%) of those countries. Hepatitis C treatment was reported to be available in non-specialist settings in five (20%) countries, although [treatment](#) was available in prisons in 18 (72%) countries. Although an improvement from 2016, 52% and 32% of countries in the 2017 Hep-CORE study still restrict access to direct-acting antiviral agents based on the degree of fibrosis and/or current injecting drug use, respectively.

"HCV can be cured in more than 95% of patients," said Prof. Markus Cornberg from the Hannover Medical School, Germany, and EASL Governing Board Member. "However, in order to prevent complications such as HCC, patients first need to be identified and treated accordingly. Screening and linkage to care are fundamental if WHO elimination

targets are to be achieved, and the data presented here are important in improving these measures."

**More information:** World Health Organization. Global Health Sector Strategy on Viral Hepatitis 2016-2021. June 2016. Available from: [www.who.int/hepatitis/strategy ... 16-2021/ghss-hep/en/](http://www.who.int/hepatitis/strategy...16-2021/ghss-hep/en/). Last accessed: February 2018.

Provided by European Association for the Study of the Liver

Citation: Linkage to care specialist facilitates access to hepatitis C treatment for people who inject drugs (2018, April 12) retrieved 27 April 2024 from <https://medicalxpress.com/news/2018-04-linkage-specialist-access-hepatitis-treatment.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.