Hepatitis C testing and treatment barriers among active drug users in European cities

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ZIS

The European Study

Background

Targeted HCV testing of risk populations is effective and cost-effective to increase the identification of HCV-infected people

HCV treatment is effective to cure the infection and to prevent further transmission

Objectives

- To monitor uptake and need for current antibody testing and treatment referral among active drug users
- To identify barriers to testing and HCV treatment

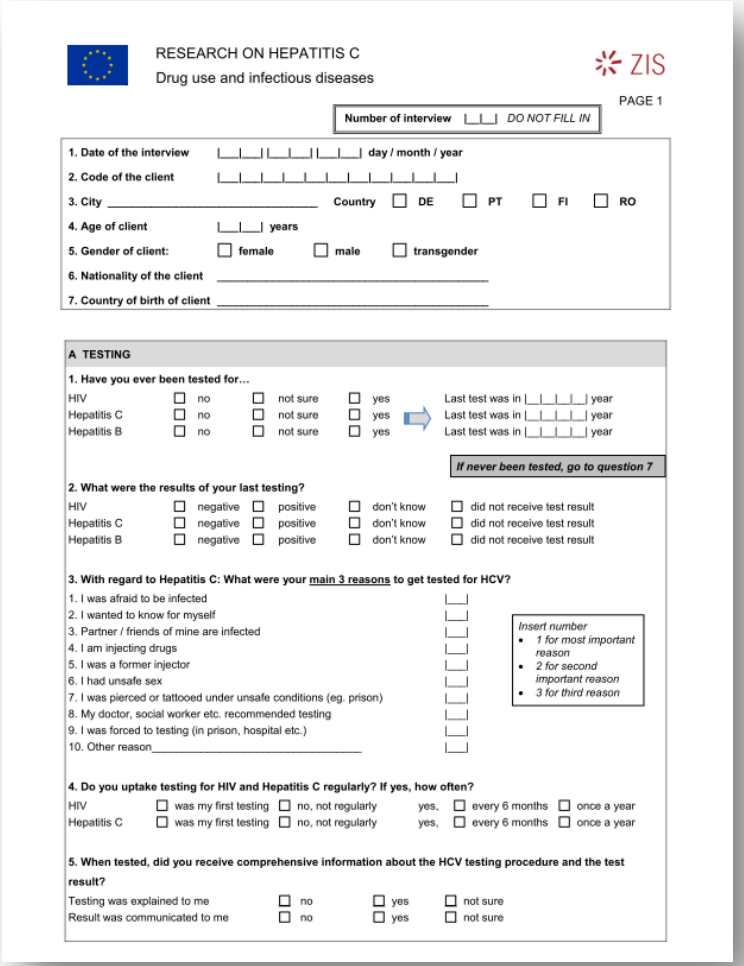
Methods

- Progressive screening for HCV testing in low-threshold drug services through a one page monitoring tool
- Investigation of drug users' experiences with HCV testing and antiviral treatment through a structured questionnaire

Questionnaire

- Portugal – three cities Porto, Lisbon and Vila Nova de Gaia - 5 low-threshold drug services with drop-in areas or outreach programmes, including opioid substitution treatment
- Finland – four cities Helsinki, Lath and Ylivieska in NSP programmes
- Romania – Bucharest – three units providing needle exchange programmes and in one unit for opioid substitution treatment
- Germany – Frankfurt – one drug service with a consumption room

Conducted from July 2013 – August 2014



RESEARCH ON HEPATITIS C
Drug use and infectious diseases

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PAGE 1

Number of interview |_|_| DO NOT FILL IN

1. Date of the interview |_|_|_|_|_|_| day / month / year
2. Code of the client |_|_|_|_|_|_|_|_|_|_|_|_|
3. City _____ Country ☐ DE ☐ PT ☐ FI ☐ RO
4. Age of client |_|_| years
5. Gender of client: ☐ female ☐ male ☐ transgender
6. Nationality of the client _____
7. Country of birth of client _____

A TESTING

1. Have you ever been tested for…

HIV	☐ no	☐ not sure	☐ yes	Last test was in |_|_|_|_| year
Hepatitis C	☐ no	☐ not sure	☐ yes	Last test was in |_|_|_|_| year
Hepatitis B	☐ no	☐ not sure	☐ yes	Last test was in |_|_|_|_| year

If never been tested, go to question 7

2. What were the results of your last testing?

HIV	☐ negative	☐ positive	☐ don't know	☐ did not receive test result
Hepatitis C	☐ negative	☐ positive	☐ don't know	☐ did not receive test result
Hepatitis B	☐ negative	☐ positive	☐ don't know	☐ did not receive test result

3. With regard to Hepatitis C: What were your main 3 reasons to get tested for HCV?

1. I was afraid to be infected |_|
2. I wanted to know for myself |_|
3. Partner / friends of mine are infected |_|
4. I am injecting drugs |_|
5. I was a former injector |_|
6. I had unsafe sex |_|
7. I was pierced or tattooed under unsafe conditions (eg. prison) |_|
8. My doctor, social worker etc. recommended testing |_|
9. I was forced to testing (in prison, hospital etc.) |_|
10. Other reason_____ |_|

Insert number
- *1 for most important reason*
- *2 for second important reason*
- *3 for third reason*

4. Do you uptake testing for HIV and Hepatitis C regularly? If yes, how often?

HIV	☐ was my first testing	☐ no, not regularly	yes,	☐ every 6 months	☐ once a year
Hepatitis C	☐ was my first testing	☐ no, not regularly	yes,	☐ every 6 months	☐ once a year

5. When tested, did you receive comprehensive information about the HCV testing procedure and the test result?

Testing was explained to me	☐ no	☐ yes	☐ not sure
Result was communicated to me	☐ no	☐ yes	☐ not sure

Characteristics of Participants

	Finland	Germany	Portugal	Romania	total
Number	56 (24%)	51 (22%)	79 (34%)	50 (21%)	236
Female (%)	31.5	29.4	20.5	24.0	25.8
Age	42,2	41,6	41,6	31,2	39,5
Stable living condition (%)	77	59	47	84	64
Years of regular use of main drug	23,0	18,2	21,5	10,6	18-22
Ever in drug treatment (%)	84	100	91	32	82
Ever in prison (%)	52	84	46	26	51

Drug Use and Risk Behaviour - (n=236)

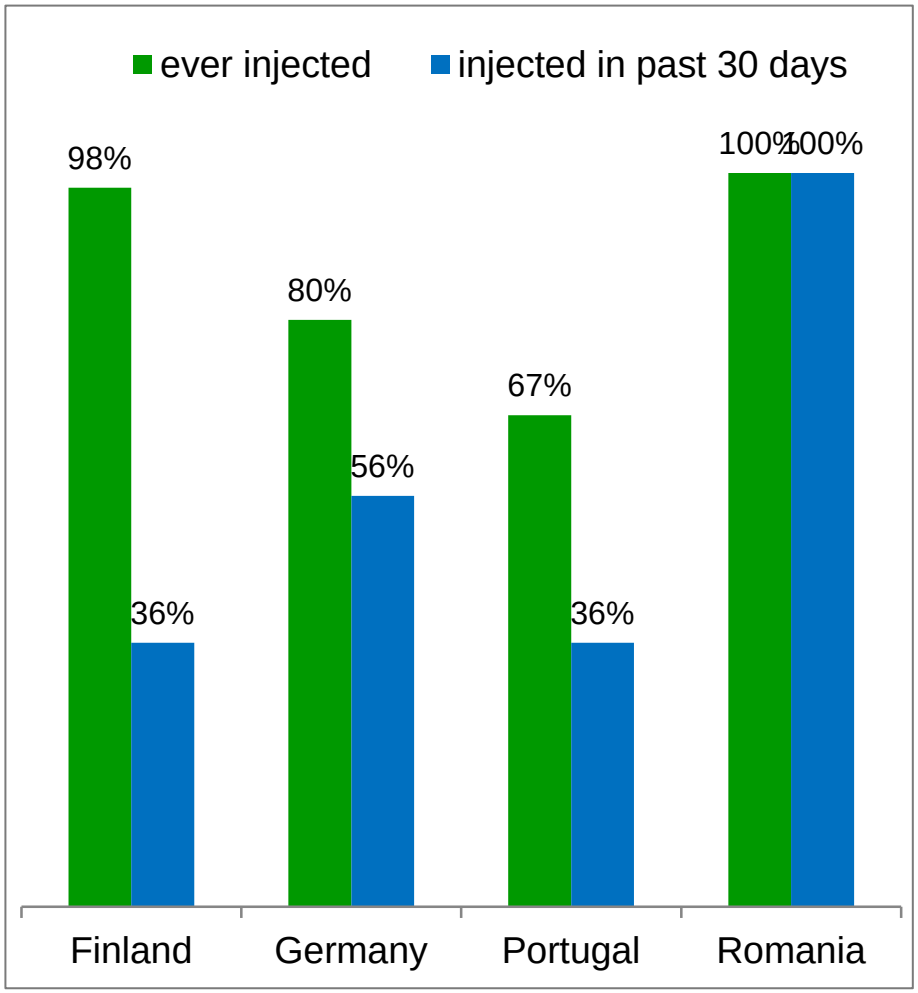
Main drugs ever used

Finland (n=56)
Amphetamines 96%
Buprenorphine 93%

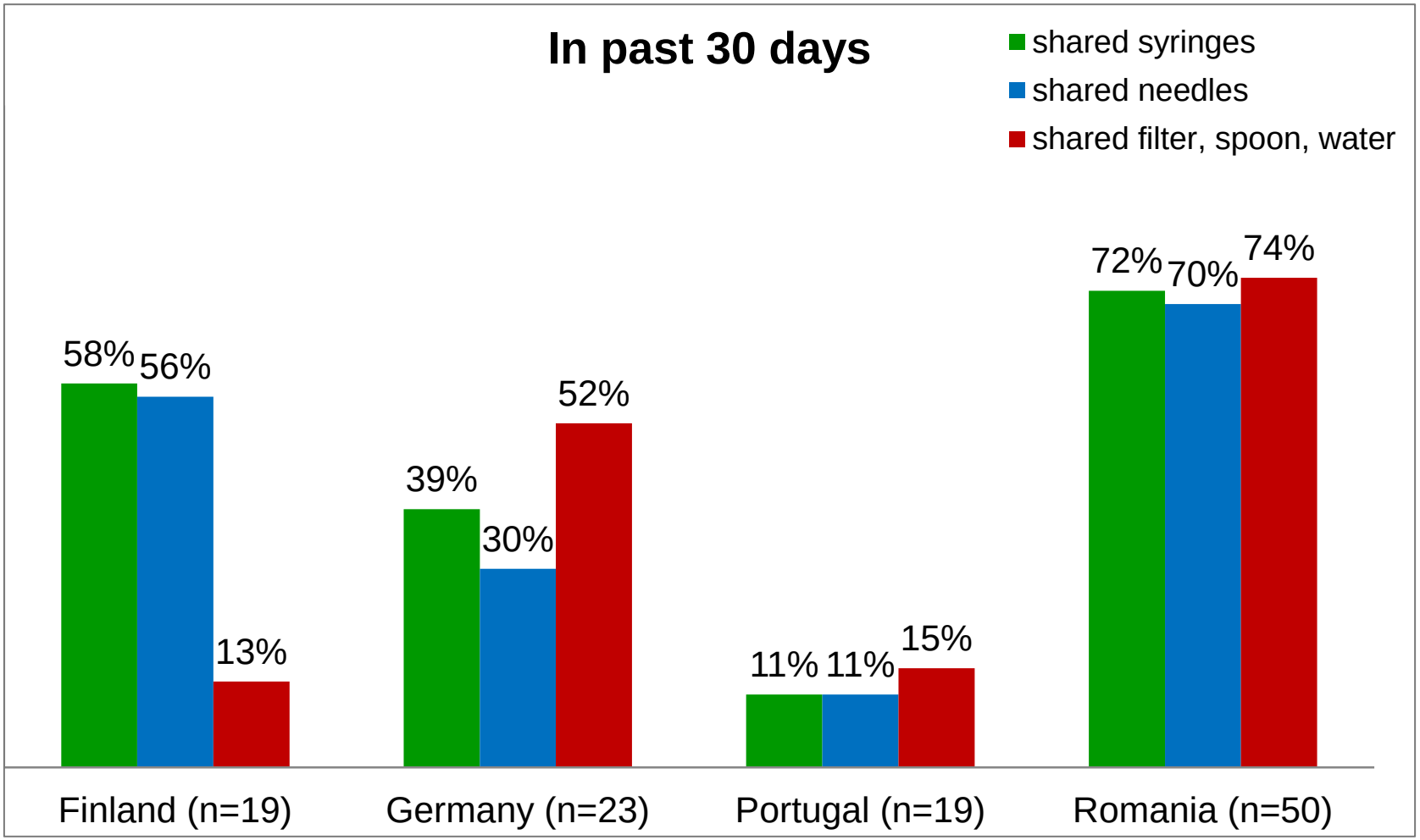
Germany (n=51)
Heroin 100%
Crack 88%

Portugal
Heroin 100%
Cocaine 76%

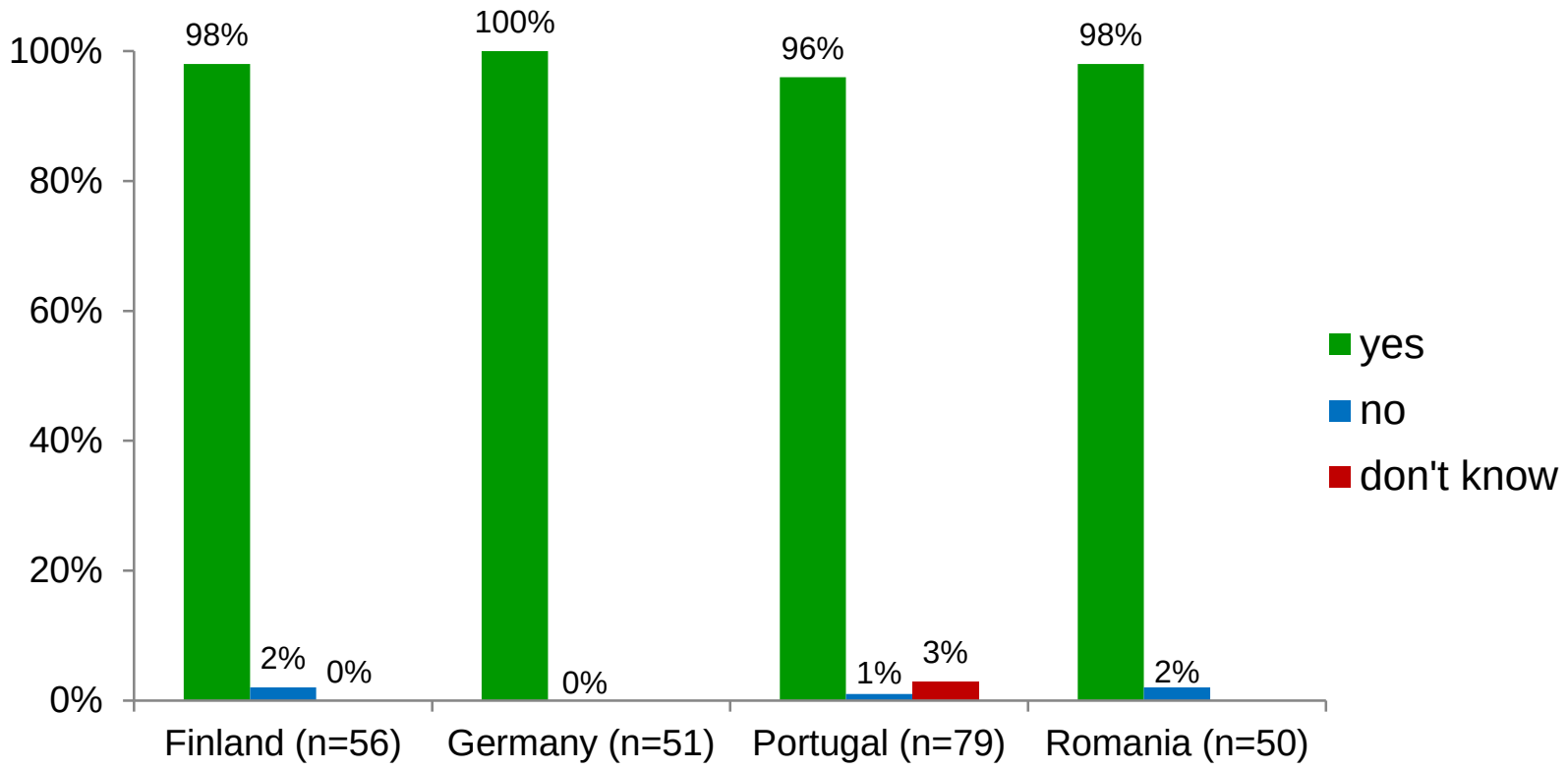
Romania
Heroin 100%



Risk Behaviour - injecting (n=197)



Ever tested for hepatitis C antibodies (n=236)



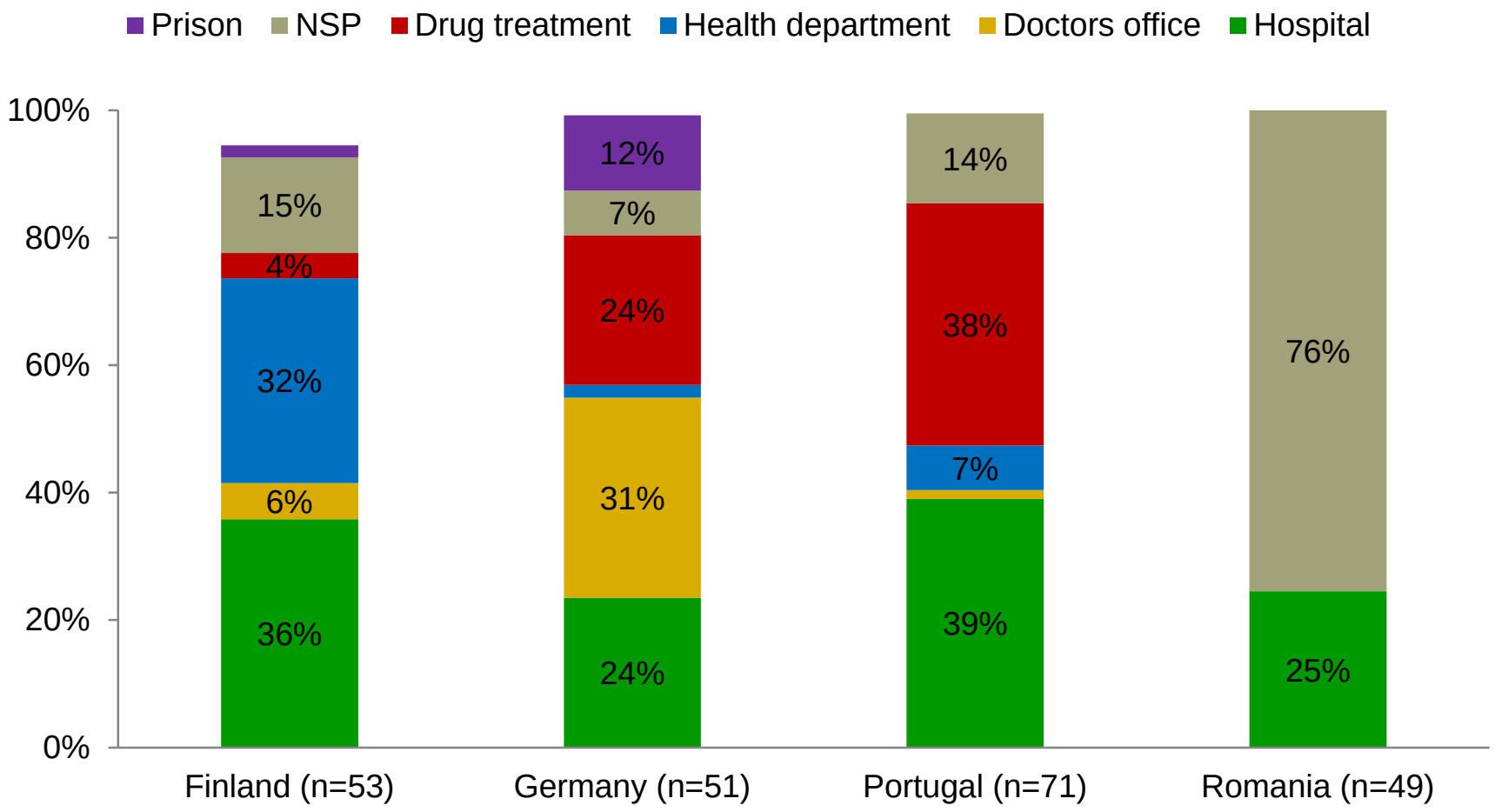
With previous HCV testing: 97.9% (n=231) – without : 5 clients

Reasons for HCV testing – n=231

The three most important reasons for HCV antibody testing

Top 1	Top 2	Top 3
1. Afraid to be infected 2. Want to know myself	1. Want to know myself 2. Recommendation by staff	1. I am injecting 2. Partner/friend is HCV infected

Questionnaire – place of last HCV testing (n=224)

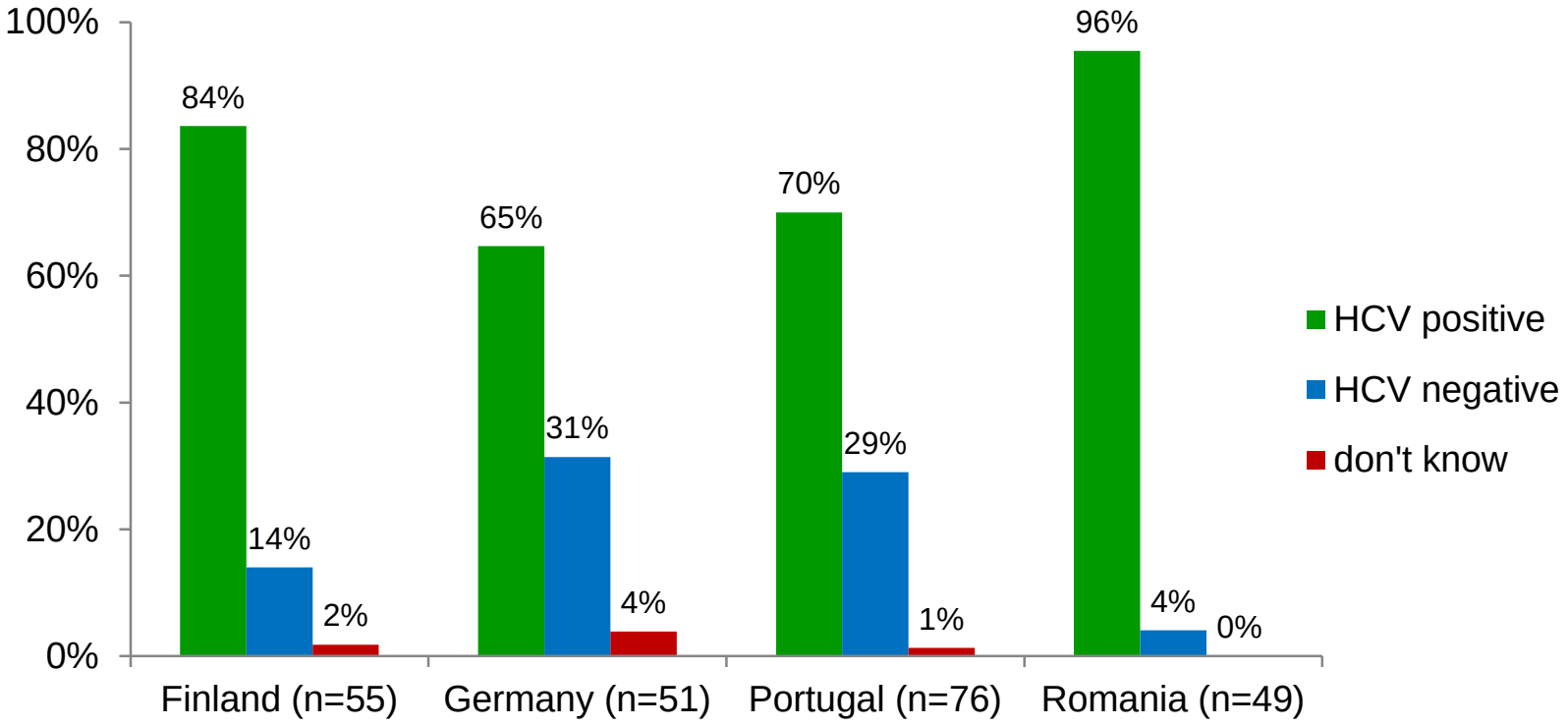


Sources of Information about HCV

The most important souces reported by drug users

Finland	• Friends (59%) • Drug services (54%) • Books/flyer (50%)
Germany	• Drug service (73%) • Substitution doctor (51%)
Portugal	• Local health service (48%) • Drug service (42%)
Romania	• Drug service (78%) • Friends (66%)

Results of antibody testing (n=231)

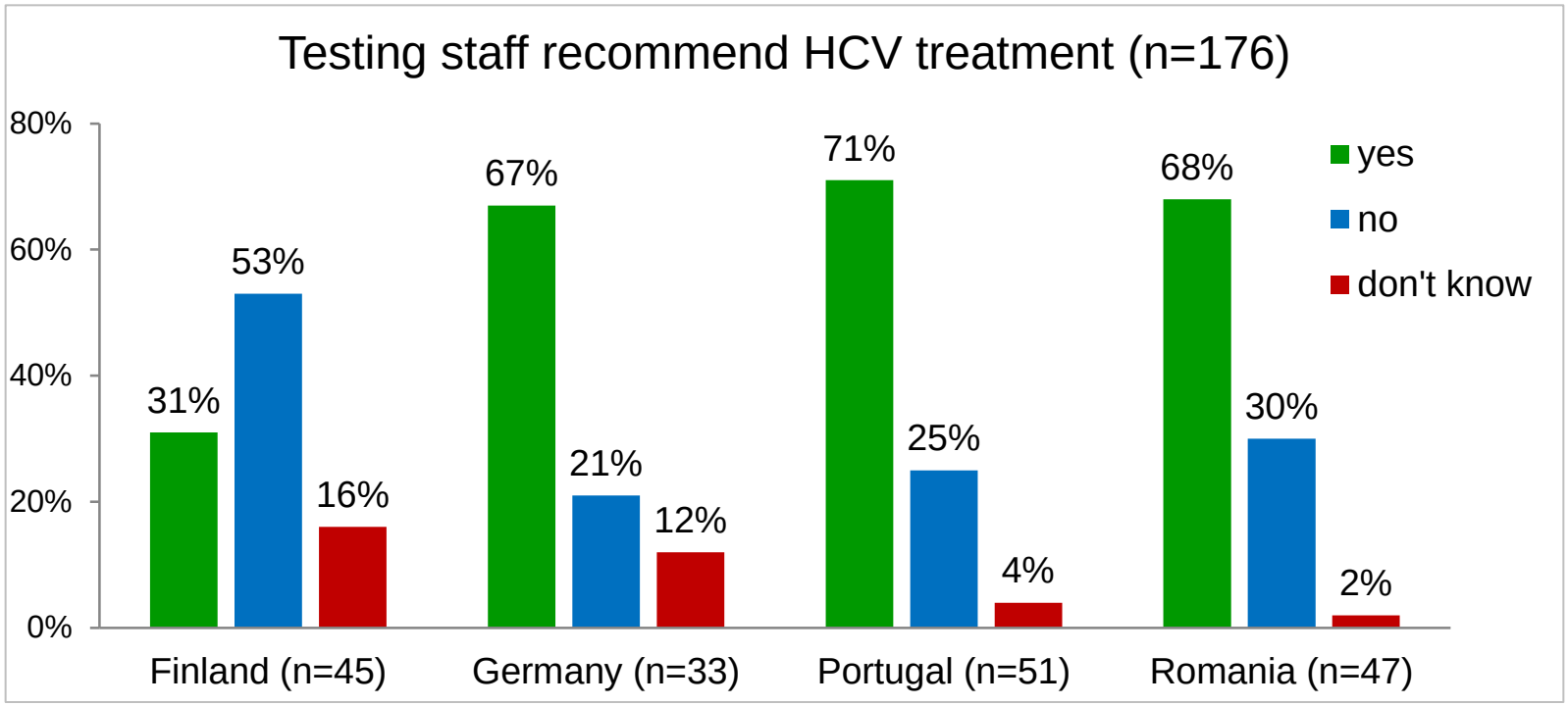


HCV-positive: 77.5 % (n=179) – HCV-negative: 20.8% (n=48)

Treatment recommendation by testing staff

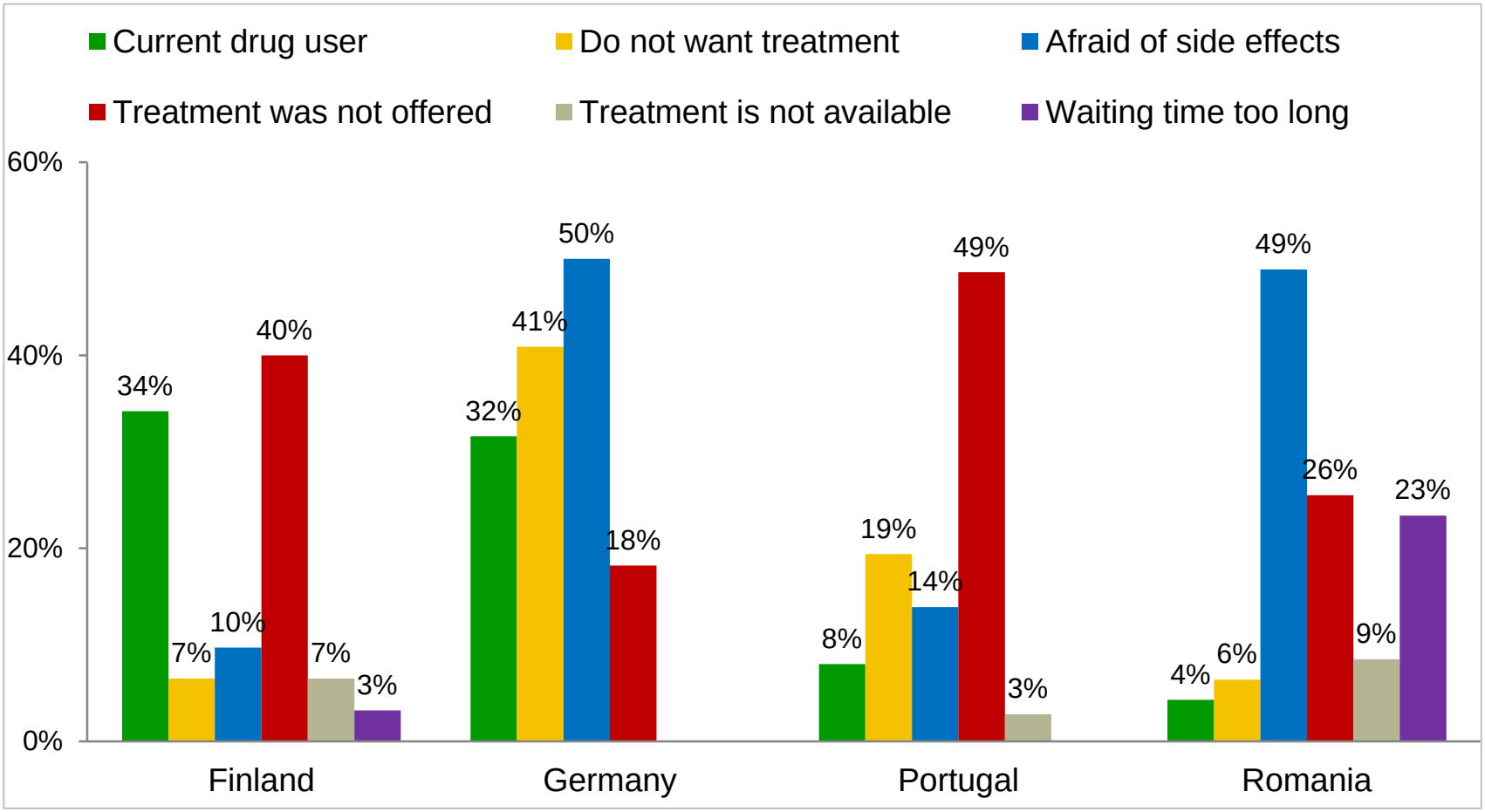
179 were found anti HCV-positive

- Most of them were infected since more than one year (64%)
- Only 14 drug users did know their genotype (especially DE, FI)



Reasons for no HCV treatment

Based on responses of 135 HCV-infected drug users



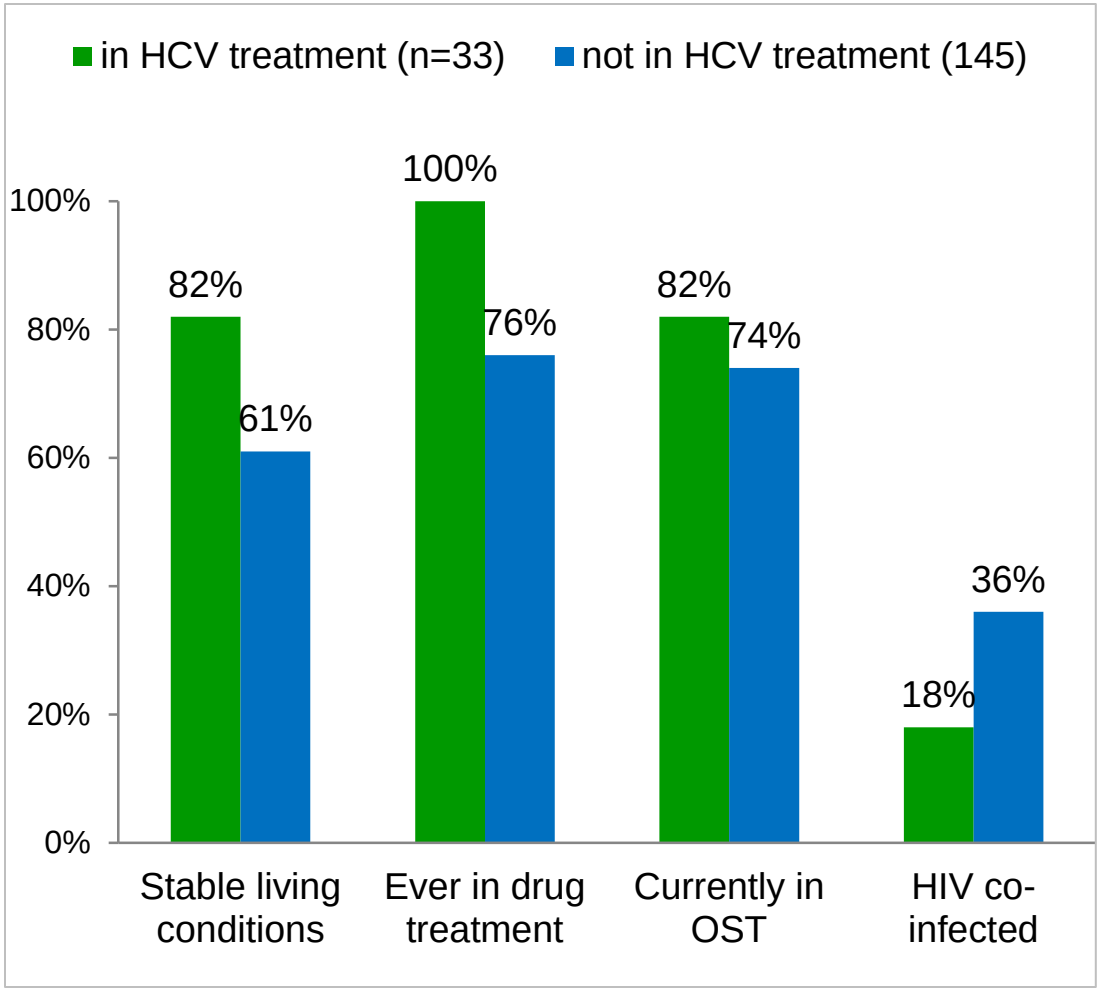
Questionnaire – ever or currently in HCV treatment

Based on responses of 178 anti HCV positive drug users

	Finland	Germany	Portugal	Total
(Ever) in HCV treatment	8 (17%)	11 (33%)	14 (27%)	33 (18.5%)
Months after diagnosis until entering treatment	160	34,4	47,3	66,9
Suffered from side effects	6	10	6	22 (66.6%)
Successful SVR	6	7	8	21 (63.6%)
Accept treatment in case of re-infection	7	8	8	23 (69.6%)

Drug users from Romania never had been in HCV treatment

Characteristics of HCV+ drug users



Mean age in years

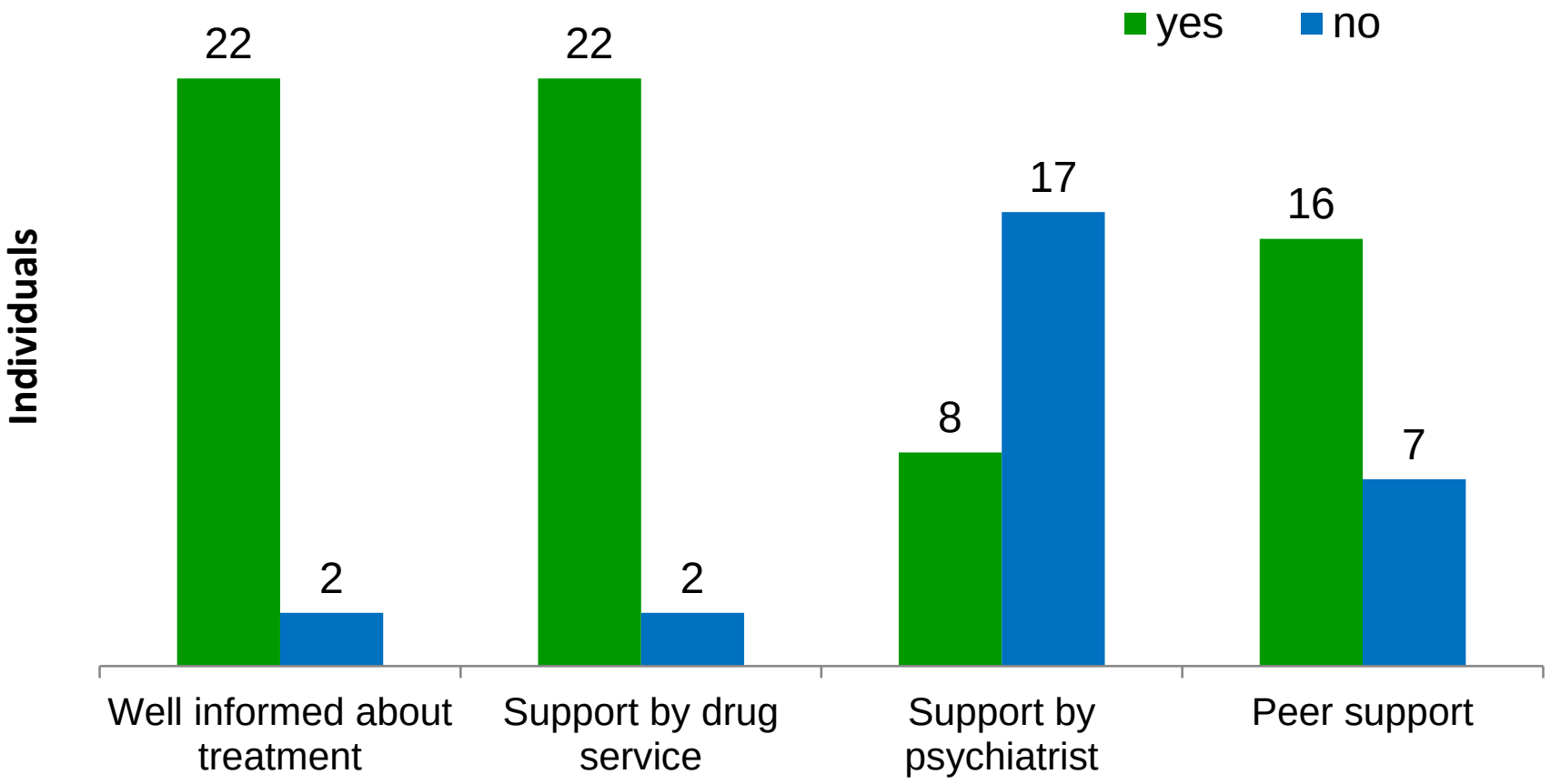
In treatment: 43

Not in treatment: 38

No differences in

- income
- injecting
- imprisonment

Support to stay in HCV treatment



Conclusions

- High uptake of HCV antibody testing among clients of low-threshold services
- Main motive is that drug users want to know their status
- Infections with HCV are highly prevalent (77.5%)

But

- Treatment uptake is low with 33 drug users out of 179 who were anti HCV positive
- Main barriers to treatment:
  - Staff did not recommend or offer HCV treatment
  - Drug users fear side effects of medication

Ressources to increase treatment uptake

- Good information on HCV and treatment – drug + health services and physicians have a key role
- Additional support provided to patients by local drug service
- Revision of national/ regional guidelines /recommendations for HCV treatment

Treatment success and reinfection

Reinfection rate of PWID after HCV treatment (Grady et al. 2013)

- Lack of studies: only 7 studies with small sample sizes
- Out of a total of 276 patients only 17 had been reinfected after EOT = 6.2%
- Reinfection rate was higher among those who continued drug injecting
- In general low risk of reinfection after successful treatment

Spontanous viral clearance (Grebely et al. 2012; Grady et al. 2013)

- Reinfection risk after spontaneous viral clearance in PWID is unclear

 - controverse results, depending on testing intervals

- Reinfection after spontaneous viral clearance can occur
- **Also**: Spontaneous clearance after HCV reinfection is reported