

4.7

AN INNOVATIVE MODEL FOR MICRO-ELIMINATION OF HCV INFECTION IN PERSONS WHO INJECT DRUG (PWID)

Messina Vincenzo¹, Russo Antonio^{1,2}, Parente Enrico³, Nuzzolo Lilia³, Marra Giuseppina³, Russo Giovanni³, Orefice Milena³, Loffreda Anna³, Andreozzi Luigi³, Pizzirusso Anna³, Ferrara Salvatore³, Stella Luigi⁴, Salzillo Angela¹, Simeone Filomena¹, Coppola Nicola^{1,2}.

¹ UOC Malattie Infettive, AORN Sant'Anna e San Sebastiano, Caserta, Italia;

² Dipartimento di salute mentale e medicina pubblica, Sezione di Malattie Infettive, Università della Campania L. Vanvitelli

³ Dipartimento Dipendenze ASL Caserta

⁴ SerD Somma Vesuviana (Napoli)

Background

The latest regional report on HCV infection in Campania, Italy, highlighted a reduced percentage of people with genotypes correlated with people who injected drug (PWID) subjected to therapy compared to the national average (7.17% compared to 13.57% for genotype 3, 7.95% compared to 10.05% for genotype 1a). The aim of this study was to evaluate an innovative model for eliminate HCV infection in a high-risk population of PWID.

Methods

Between December 2017 and June 2019 a prospective, interventional, before and after study, based on the active and close cooperation between some Services for the Dependence (SerDs) in Campania and the corresponding 3rd level units of Infectious Diseases in Caserta, Campania, Italy, was performed.

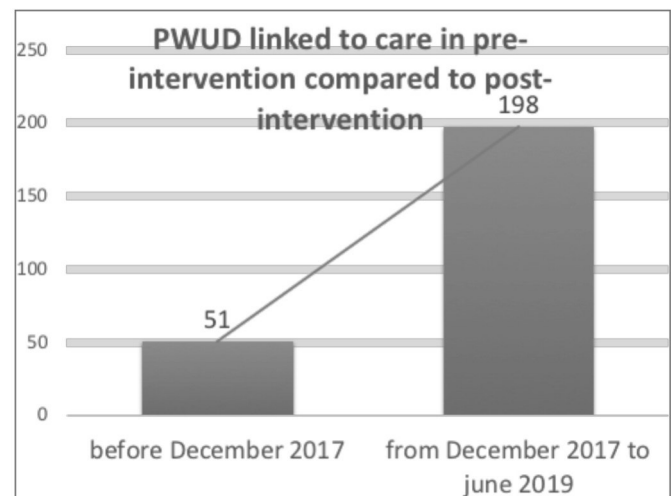
The intervention included three periodic prospective audits conducted by the infectious disease consultants in the SerD to improve the knowledge on HCV infection and on the need to treat. The infectious disease consultants were responsible for writing and sharing diagnostic protocols for HCV infection to do at SerD; finally, a fast lane to access the Infectious Disease Unit and to start DAA was planned and a protocol for the follow-up during and after DAA with a close collaboration between SerD and Infectious Disease Unit' personnel was identified.

Results

In the pre-intervention period 51 PWID were treated with DAA, 15 (29.4%) were genotype 1a and 16 (31.4%) were genotype 3; in the post-intervention period 198 PWID were linked to care, 65 (32.9%) were genotype 1a and 55 (27.7%) were genotype 3. Compare with the pre-intervention period the number of subjects linked to care for HCV infection increased by 388% (51 vs 198) with no statistical difference in genotypes (genotype 1a:15 vs 65, p= 0.64; genotype 3:16 vs 55, p= 0.61).

Conclusions

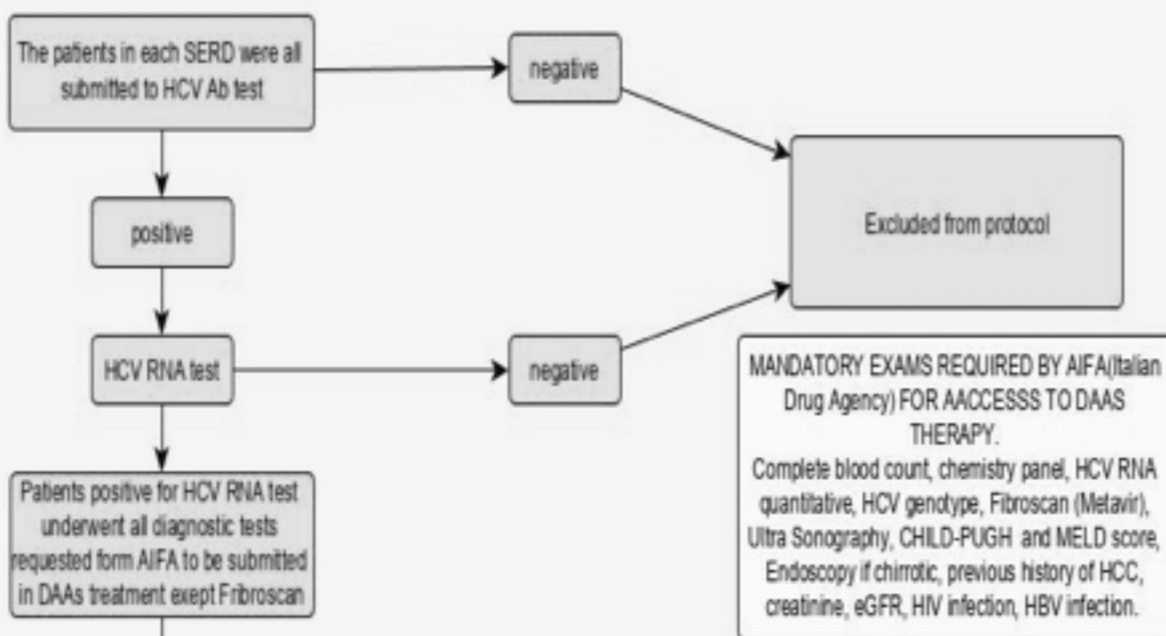
This innovative procedure has high rates of linkage to care in PWID with HCV infection.



Audit performed in SERDs's structure



Protocol performed in SERDs structure



Protocol performed in 3rd Unit ID

