

Introduction

In the US, there has been a dramatic rise in hepatitis **C** infection and a shifting demographic with the highest rates in persons aged 20-39 years. Injection drug use is the most common mode of transmission. While many novel strategies to expanding hepatitis C treatment have been proposed, there has been little reported progress toward establishing a standardized, wide-scale approach. In response, we developed a pilot quality improvement program combining screening and initiation of hepatitis C treatment utilizing a simplified algorithm adapted for the officebased opioid treatment (OBOT) to provide colocalization of substance use and hepatitis C treatment.

Methods

Patient screening began in 1/2021 and was expanded to include Carilion Clinic Psychiatry and OB/GYN OBOT programs throughout the health system by April 2021. Individuals with HIV or HBV co-infection, significantly impaired hepatic function, pregnancy, or fibrosis score >3 were referred to GI for their care. The remaining patients were eligible for active intervention with a DAA and monitoring over the course of their treatment with final follow-up after 8-12 weeks.

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Results

As of September 2022, a total of 400 patients were screened for HCV. 74 (18.5%) patients initially tested positive. Among patients screening positive for HCV, 7 were referred for specialty care treatment, 5 had spontaneous negative seroconversion, 27 are in the pre-treatment stage, and 35 are on treatment on site

Discussion:

Initial results revealed a high rate of seroprevalence among screened OBOT patients highlighting several challenges faced by this population including lack of awareness of infection and barriers to accessing care. Within this same group, 48.2% had either initiated or completed their course of DAA treatment within the first 6 months of the intervention phase of the program. Targeting patients in outpatient substance use treatment could identify a subset of at-risk individuals with a high propensity for engaging and facilitate following through with hepatitis C treatment.



On site treatment is an efficient alternative for treatment.

7 referred to specialty clinic rest under evaluation

> **Confirmed SVR 19** pending SVR 11