# HCV care within an NEP and OST clinic in Stockholm, Sweden

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Integrated HCV care within the Stockholm Needle Exchange Programme (NEP; including a mobile unit) and one opioid substitution therapy (OST) clinic

**Solution** Aim: to enhance the HCV care cascade for people who inject drugs (PWID) and those on OST in Stockholm

Why are the models needed?<sup>1,2</sup>



Prevalence of HCV among clients at the Stockholm NEP and OST clinic 15–19%

Rate of advanced fibrosis detected in clients at the Stockholm NEP and OST clinic



Stockholm, Sweden

Mean duration of injection drug use among clients at the Stockholm NEP

# What are the models and how do they work?<sup>1</sup>

Both settings address the entire HCV care cascade and provide HCV screening, access to treatment, clinical management, counselling, post-treatment follow-up and social care/intervention

## **Maria Addiction Centre**

The team

**2 specialists** (1 in psychiatry and 1 in infectious diseases for remote consultations)

### 1 nurse

Nurse: Patient evaluation, tests for HCV, performs FibroScan<sup>®</sup>

*If aged <35 years, HCV <15 years and an APRI score <1 – NO FibroScan before treatment* 

Specialist (psychiatrist): Prescribes treatment

# Stockholm Needle Exchange



# The team

**1 specialist** in infectious diseases/ psychiatry/addiction medicine



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Nurse: Patient evaluation, tests for HCV, performs FibroScan

If aged <35 years, HCV <15 years and an APRI score <1 – NO FibroScan before treatment



Specialist: Prescribes treatment and assesses the patient if cirrhosis detected



Specialist (infectious diseases): Remote consultation with specialist psychiatrist if needed

Nurse: Administers treatment within OST clinic Weekly/frequent treatment visits for dispensation of medication

Nurse: Follow-up regarding sustained virological response (SVR) and possible reinfection every 6–12 months

Nurse: Administers treatment within NEP Weekly/frequent treatment visits for dispensation of medication

Nurse: Follow-up regarding SVR and possible reinfection every 3–6 months

Since July 2019, the NEP also has a mobile unit which includes a FibroScan/HCV service

Interventions used to enhance HCV testing, linkage to care and treatment uptake

- Integrated HCV care including on-site HCV testing, assessment, treatment, counselling and education
- Non-invasive liver disease assessment using transient elastography

# Outcomes and key findings<sup>1,2</sup>

# Maria Addiction CentreStockholm Needle Exchange6698%77%

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Patients with chronic HCV started treatment between December 2017 and August 2019

#### SVR rate (ITT) out of 47 patients

- Compliance has been extremely good and the intervention has been well received by clients
- HCV treatment within an OST clinic takes a holistic approach and facilitates addressing general health in this population
- Psychiatrist has become skilled and independent in treating HCV

#### Patients with chronic HCV started treatment between December 2017 and August 2019

#### SVR rate (ITT) out of 95 patients

- Handing out weekly pillboxes that patients secure to their trousers or around their neck has been very successful
- Cooperation with other caregivers, prisons and social support workers has been essential to enhance compliance
- Dedicated nurses and frequent contacts (by phone) have been essential for treatment compliance

Treatment has been successfully implemented within an NEP and OST clinic as part of a holistic approach to address the needs of people with HCV that otherwise have limited or no access to HCV treatment

1. Kåberg M, personal communication; 2. Kåberg M, et al. INHSU 2019; Poster #050



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