

Limburg is the first Belgian province on track for hepatitis C virus eradication

in the most important group at risk: people who use drugs

zorggroep
zin

BUSSCHOTS D¹, BIELEN R^{1,2}, KOC ÖM^{1,3}, DERCON E⁴, †VERRANDO R⁴, ROBAEYS G^{1,2,5} ¹UHasselt, Faculty of Medicine and Life Sciences, Diepenbeek, Belgium, ²Ziekenhuis Oost-Limburg, Department of Gastroenterology, Genk, Belgium, ³Maastricht University Medical Centre, Medical Microbiology, School of NUTRIM, Maastricht, the Netherlands, ⁴zorGGroep Zin Limburg, Hasselt, Belgium, ⁵Department of Gastroenterology and Hepatology, University Hospitals KU Leuven, Belgium - † in memoriam

INTRODUCTION

- Hepatitis C viral (HCV) infections are the leading cause of chronic liver disease and liver-related deaths,
- People who use drugs (PWUD) and more specific inject drugs are at the heart of the ongoing epidemic.
- Recent modelling indicated:
 - More people tested
 - More people need to be linked to care
 - Minimum 8% of the current patient pool who requires treatment has to be treated per year in Belgium

AIM

The aim of this project is to **eradicate HCV** in **PWUD** in an **addiction care center** in Limburg, Belgium and to **monitor reinfection** after therapy.

METHOD

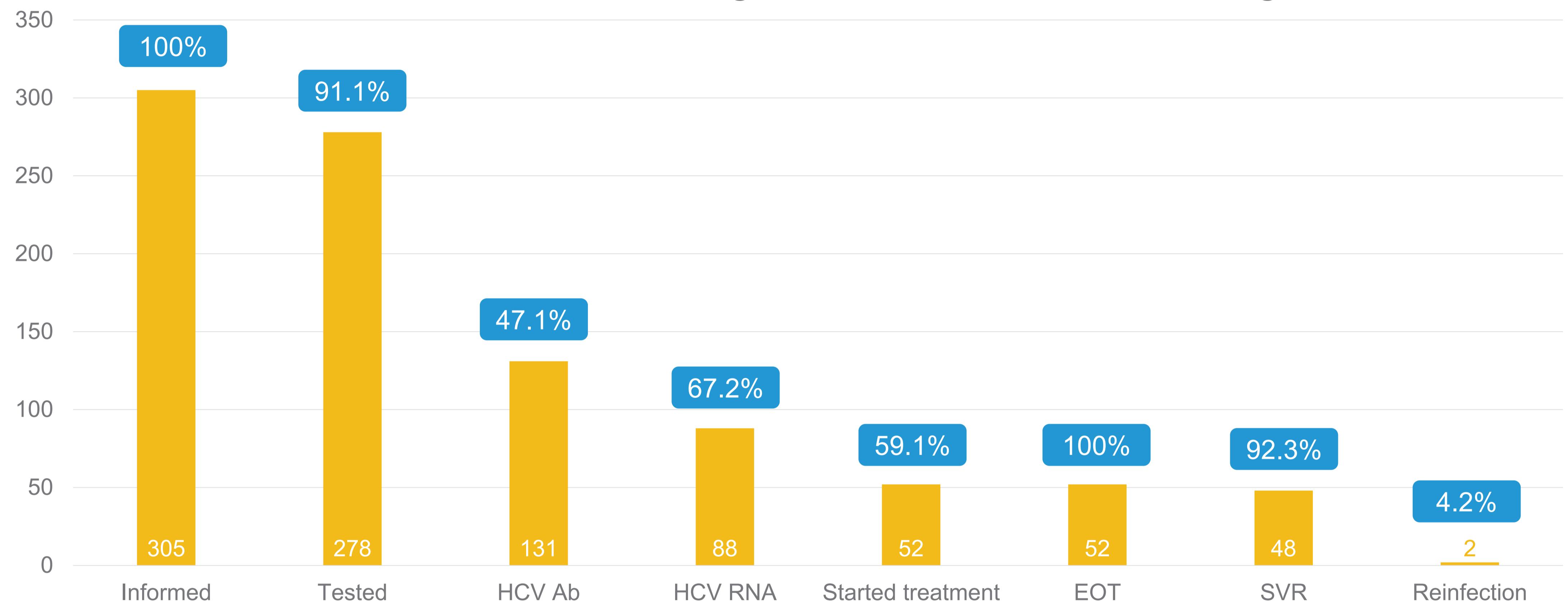
- Ongoing project started in November 2016 (data 2019 presented)
- zorGGroep Zin Limburg
 - = Addiction care centre with several locations in the province Limburg

The case manager / HCV nurse

- On-site screening:
 - OraQuick® HCV antibodies (Ab)
- Facilitated referral to a hepatologist
- Monitoring for reinfection

RESULTS

Cascade of care of PWUD attending an addiction care center in Limburg 2019



Abbreviations; HCV: hepatitis C virus, Ab: antibody, RNA: ribonucleic acid, EOT: end of treatment, SVR: sustained virologic response, PWUD: people who use drugs

CONCLUSIONS

Limburg is the **first Belgian province on track** to meet the goals of the World Health Organization to **eradicate HCV by 2030** in a **PWUD population**.

With the case management program **every PWUD** attending an addiction care center in Limburg can be **screened** and after treatment they are **closely monitored for reinfection**.

REFERENCES

- Busschots D et al. Eliminating viral hepatitis C in Belgium: the micro-elimination approach. BMC Infect Dis. 2020;20(1):181.
- Grebely J et al. Global, regional, and country-level estimates of hepatitis C infection among people who have recently injected drugs. Addiction. 2019;114(1):150-166.
- Degenhardt L et al. Global Prevalence of Injecting Drug Use and Sociodemographic Characteristics and Prevalence of HIV, HBV, and HCV in People Who Inject Drugs: A Multistage Systematic Review. Lancet Global Health. 2017;5(12):e1192-e1207

ACKNOWLEDGEMENTS

This project has been made possible thanks to the support of the Flemish government and a pharmaceutical grant by Gilead Sciences. No benefits were granted to the pharmaceutical industry. The project is part of the 'Limburg Clinical Research Center (LCRC), supported by the foundation Limburg Sterk Merk, province of Limburg, Flemish government, Hasselt University, Ziekenhuis Oost-Limburg and Jessa Hospital.

DISCLOSURES

D.B. has been an employee of Gilead Sciences since October 2021 and a volunteer at Hasselt University.

CONTACT

Prof. Dr. Geert Robaey
geert.robaeys@uhasselt.be