

## PROJECT HELPS MARGINALISED HCV SUFFERERS GET TREATMENT

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The treatment revolution which has transformed the cure of hepatitis C is by-passing a large proportion of Australians who are infected with the potentially deadly virus.

University of Sydney Professor Geoff McCaughan of Sydney Local Health District (SLHD) says it appears that large numbers of hepatitis C (HCV) sufferers are missing the opportunity to receive the new treatments for reasons which are as much social as well as medical.

HCV can now be easily treated - and in most cases cured - by taking one of a recently developed class of oral drugs called Direct Acting Antivirals (DAAs). DAAs are molecules which target specific non-structural proteins of the virus and result in disruption of viral replication and infection. They can be taken as a daily capsules, require only 6-12 weeks of therapy, have minimal side effects and cure HCV in over 95 per cent of cases.

“These DAAs are a total revolution in the treatment of HCV, which is a major cause of mortality and morbidity and the development of liver cancer around the world,” says Professor McCaughan.

In March, 2016, Australia became the first country in the world to make the new drugs available without any restriction to any patient in the community through the Pharmaceutical Benefits Scheme.

“When that happened we treated enormous numbers of patients very, very quickly because we had them on our books and they had been attending our care over the last decade,” says Professor McCaughan.

“We treated them over a 6-12 month period but after 12 months the numbers of people we were seeing in our hospital clinics fell dramatically and we were not sure why.

“We think we’ve treated only about a third of all those infected with hepatitis C in Australia and, when you consider that about 1 per cent of the Australian population is infected with HCV, that means there’s a very large number of people who could be cured, but aren’t receiving the new treatments.”

Getting to the bottom of why so many people are not taking part in the new treatments is the purpose of a research project by Professor McCaughan, University of Sydney Professor Jacob George of Western Sydney Local Health District and colleagues, which is currently funded by Sydney Health Partners.

The project has two arms: firstly, a health care delivery arm which seeks to get DAAs into the community and available to people who aren’t currently on treatment.

Secondly, the project is researching a hypothesis that there is a group of people who are declining to go on to treatment, even though they are aware of the new drugs are available.

“We believe this group has characteristics which are making it much more likely that they will decide not to seek or take part in treatment.

“Our hypothesis is that patients within marginalised communities have a lot of other social and health issues and don’t see HCV – because they are relatively asymptomatic – as a health priority. They’ve got other bigger priorities to deal with, such as their mental health or drug dependency.

“If we understand the barriers in those individual patients and groups of patients then we can start to overcome those barriers and get them onto treatment.”

The project is sending six-person teams of doctors and nurses to “blitz” locations in both inner west and western Sydney where the marginalised can be found - including opioid addiction treatment clinics, mental health facilities and centres providing care to the homeless.

By the end of June 2018, more than 550 people had been screened, 94 were found to have HCV and 26 had commenced drug treatment.

SLHD Hepatitis Coordinator Janice Pritchard-Jones said it was an encouraging result in communities which are often very difficult to engage.

“Treating marginalised HCV sufferers with the new drug therapies has proven more difficult and required far more resources than was first predicted,” she said.

“Opioid treatment or mental health staff are understandably prioritising the clients other health needs and we are working closely with them to try and eliminate hepatitis C and reduce liver related illness and death.

“Without the support of Sydney Health Partners to send our team into these marginalised communities, most of these people would probably not have been screened, let alone treated. I think the project is making a big difference and we plan to get many more people cured of hepatitis C.”