



HCV diagnosis and treatment among people who inject drugs in Vietnam

*Vietnam Administration for HIV/AIDS Control
Ministry of Health*



Situation of HIV epidemic, hepatitis B and C in Vietnam

- HIV epidemic:
 - **242.000** [220K-270K]: Estimated HIV infection
 - **220.580**: Number of test reporting for current infection (5% overlapping)
 - **112.368**: Cumulative HIV/AIDS deaths
 - **11.037**: New diagnosis in 2022
- In Vietnam, estimates by the Ministry of Health and WHO as of July 2017:
 - 7.8 million people with chronic HBV infection and
 - 1 million people with viral hepatitis C infection.
- Hepatitis C: Vietnam ranks 5th in the world in terms of HCV burden
 - 2019: anti-HCV:1.8%, HCV core antigen ratio(HCVcAg): 1.0%
 - The prevalence of anti-HCV (+) in IDUs: 60-80%¹;
 - Anti-HCV (+) prevalence in HIV-infected people: 26-44%
- 172.000 PLWH on ART
- 52.000 patients on MMT

1. WHO (2017); 2. MOH- WHO (2017) 2. MOH-CDC (2019)



Model of HCV diagnosis and treatment for PWID

Eligibility for treatment: HIV infected patients, people on MMT with HCV infection



MMT facilities: Provide counseling on the risk of HCV for PWID, high cure rate of HCV treatment, requirements for diagnostic tests for HCV, refer patients with anti HCV positive to HIV facilities for HCV viral load test, HCV treatment and post-treatment follow-up

HIV facilities: Provide HCV diagnosis treatment and follow up after post treatment



MOH/VAAC's plan for HCV elimination among PWID in Vietnam

- From 2021- 2022, with support from the Global Fund, the MOH/Vietnam Administration for HIV/AIDS Control (VAAC) provided HCV treatment to 16,000 people. The majority of them were people who inject drugs (PWID) was on methadone maintenance treatment (MMT) with HCV infection and HIV/HCV co-infection.
- Based on these results, VAAC is currently developing a plan on HCV prevention and treatment for high-risk populations. For PWID, interventions are focused on eliminating HCV through:
 1. Increasing awareness among policymakers, health care workers, PWID about the importance of viral hepatitis C prevention, testing and treatment.
 2. Developing an intervention package of HCV prevention, including re-infection, treatment, the communication and demand generation package.
 3. Continuing to implement primary prevention, including improved of medical injection and procedures, comprehensive prevention including harm reduction and other evidences based measure for PWID



MOH/VAAC's plan for HCV elimination among PWID in Vietnam (cont.)

4. Promoting simplified service delivery models, including decentralizing hepatitis C testing and treatment to district level health facilities; integrating with other services, such as in HIV treatment clinics or MMT facilities.
5. Allocating increased financial resources to viral hepatitis C, which include external catalytic funding and social health insurance for prevention, testing and treatment.
6. Diversifying forms of communication and demand generation to reach the target population, combined with the provision of HCV prevention and treatment services.
7. Strengthening the role of community-based organizations (CBOs) in reaching the target population, collaborating with treatment facilities to implement demand generation activities, and providing HCV prevention and treatment services for PWID.
8. Implementing of policy advocacy activities to increase social health insurance coverage for HCV treatment.



Implementation of Global Fund-supported HCV treatment for PLHIV and PWID in Vietnam

In 2020-2021 and by mid-2022, Vietnam was affected by the COVID-19 epidemic. The social distancing in the most provinces had a strong impact on communication and access to hepatitis C treatment services. In order to successfully implement the Global Fund-supported HCV treatment program, MOH/VAAC implemented the following activities:

- 1. Developed SOPs for service delivery and coordination procedures** between provincial CDC and HIV/AIDS treatment facilities, methadone treatment facilities and HCV viral load testing facilities. Provincial CDCs played a key role in directing the implementation of demand generation activities, guiding service delivery, coordinating resources, and identifying and addressing problems that occurred during the program implementation.
- 2. Mobilized support from PEPFAR partners and participating from CBOs together.** This support included clinical support at treatment facilities and livestreams with CBOs and clinical experts to communicate on the benefits of HCV treatment.



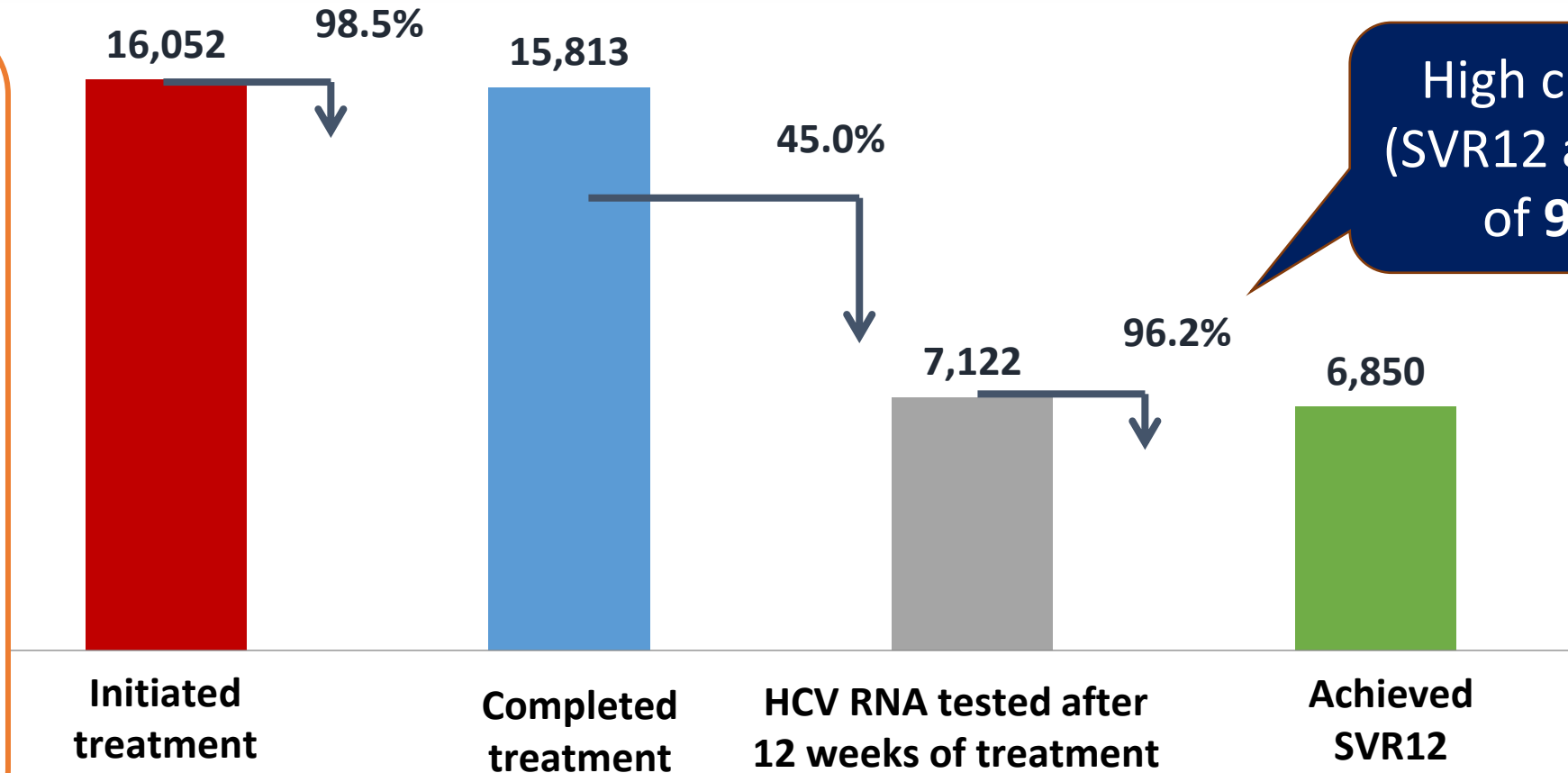
Implementation of Global Fund-supported HCV treatment for PLHIV and PWID in Vietnam (cont.)

- 3. Established a quick response team** housed at the VAAC that used the Zalo messaging platform to connect service providers throughout the country.
- 4. Mobilized clinical experts on HCV treatment** at hospitals, international organizations as well as **social health insurance experts**, in providing technical support to strengthen capacity for health staff in delivering HCV treatment and support social health insurance reimbursement for services used.
- 5. Rapidly analyzed and provided results on HCV cure rate** to reinforce and enhance clients' confidence in the effectiveness of HCV treatment.
- 6. Rapidly deployed DAA drugs** based on actual need.



Updated HCV treatment results (as of April 30, 2023)

Total: 16.052
people
received HCV
treatment with
4.492 patients
on MMT and
patients on
ART



High cure rate
(SVR12 achieved)
of **96.2%**



Next plan for scaling HCV treatment among PWID

1. Expand HCV diagnosis and treatment with from support Global Fund for PWID
2. Implement the demand generation activities about importance of HCV diagnosis and treatment among PWID group.
3. Develop plan for eliminating of HCV among key population, including PWID.



THANK YOU