



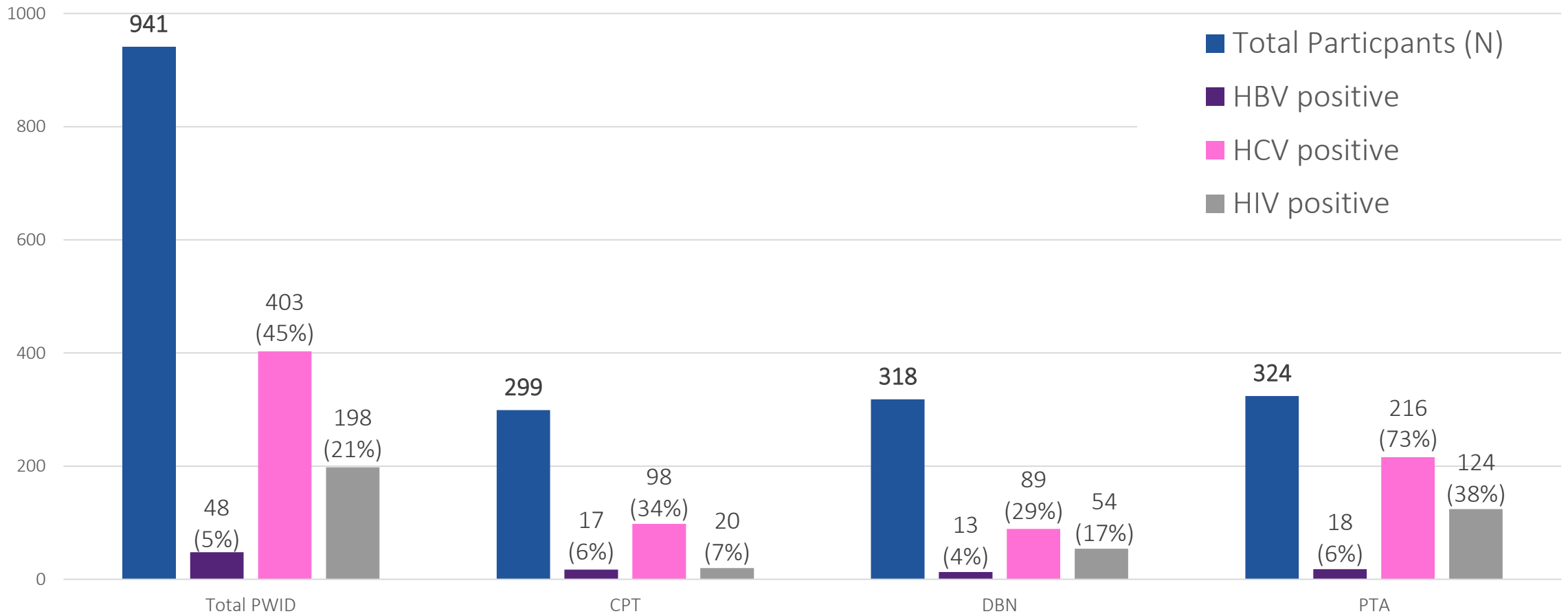
NACOSA

**Hepatitis screening, vaccination and treatment
services within existing Opiate Substitution Therapy
programme in South Africa**

**Yolaan Andrews,
Key Populations Programme Manager**

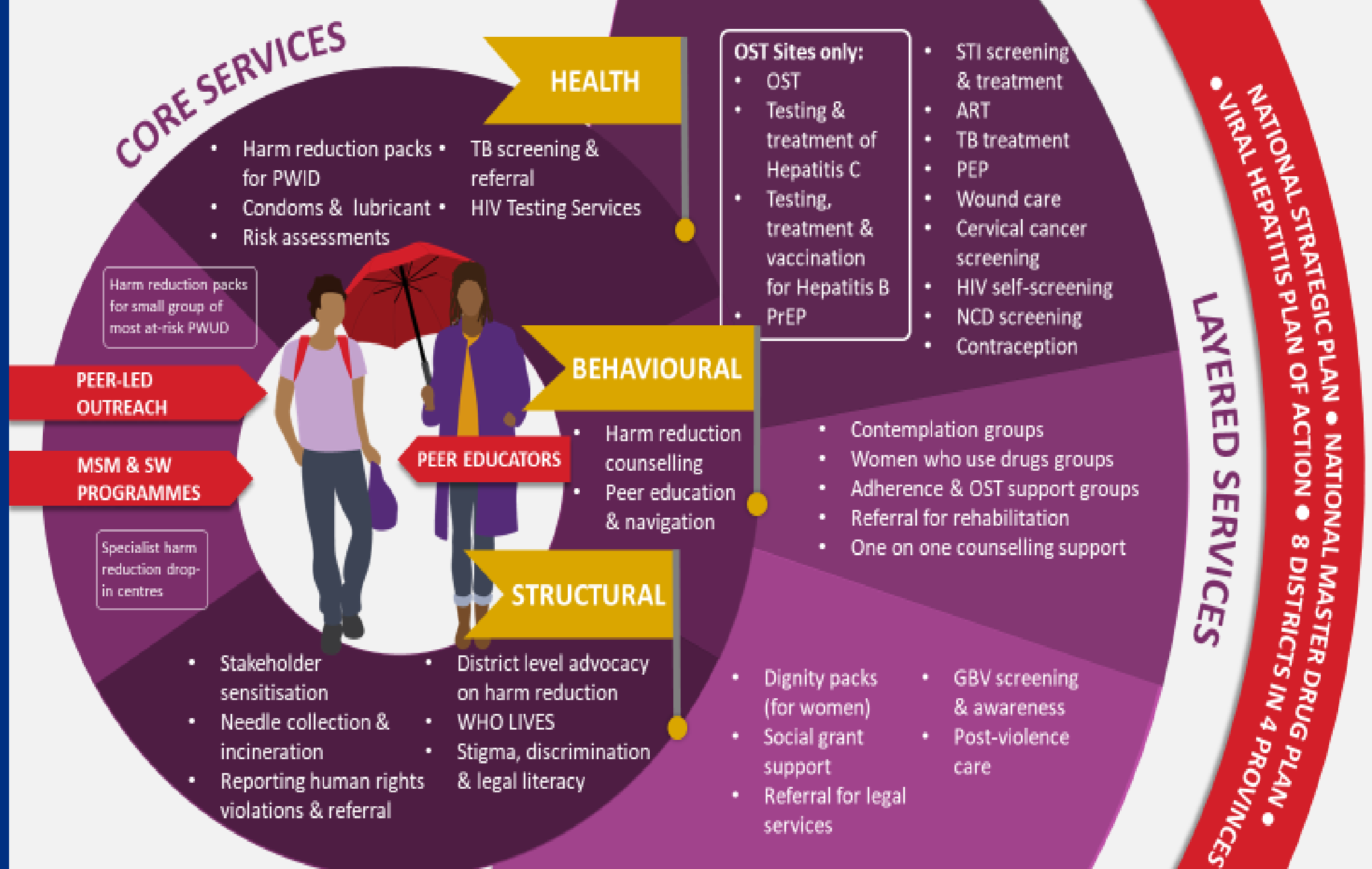
5 September 2023

HBsAg, HCV and HIV prevalence of PWID, by Area (2017/18)



Source: Scheibe et al, 2019

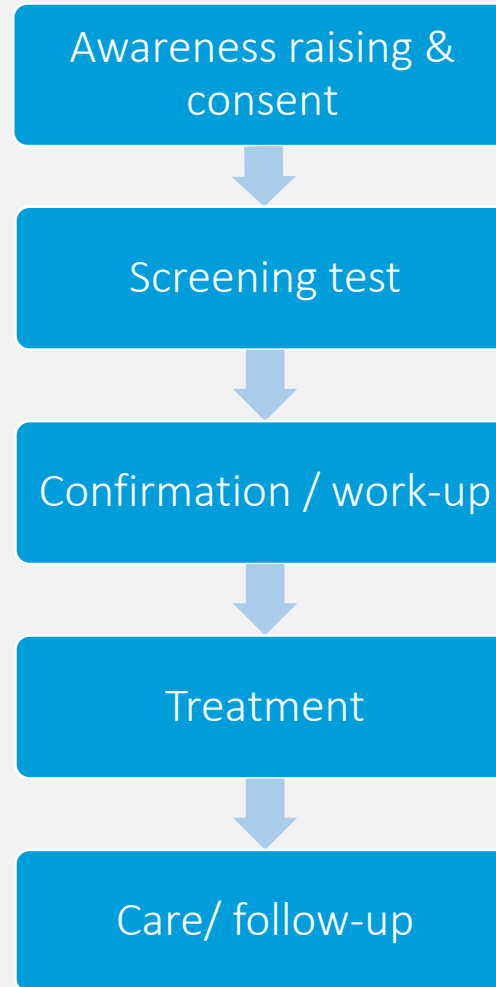
SERVICE PACKAGE



Approach: integration into OST services

HCV

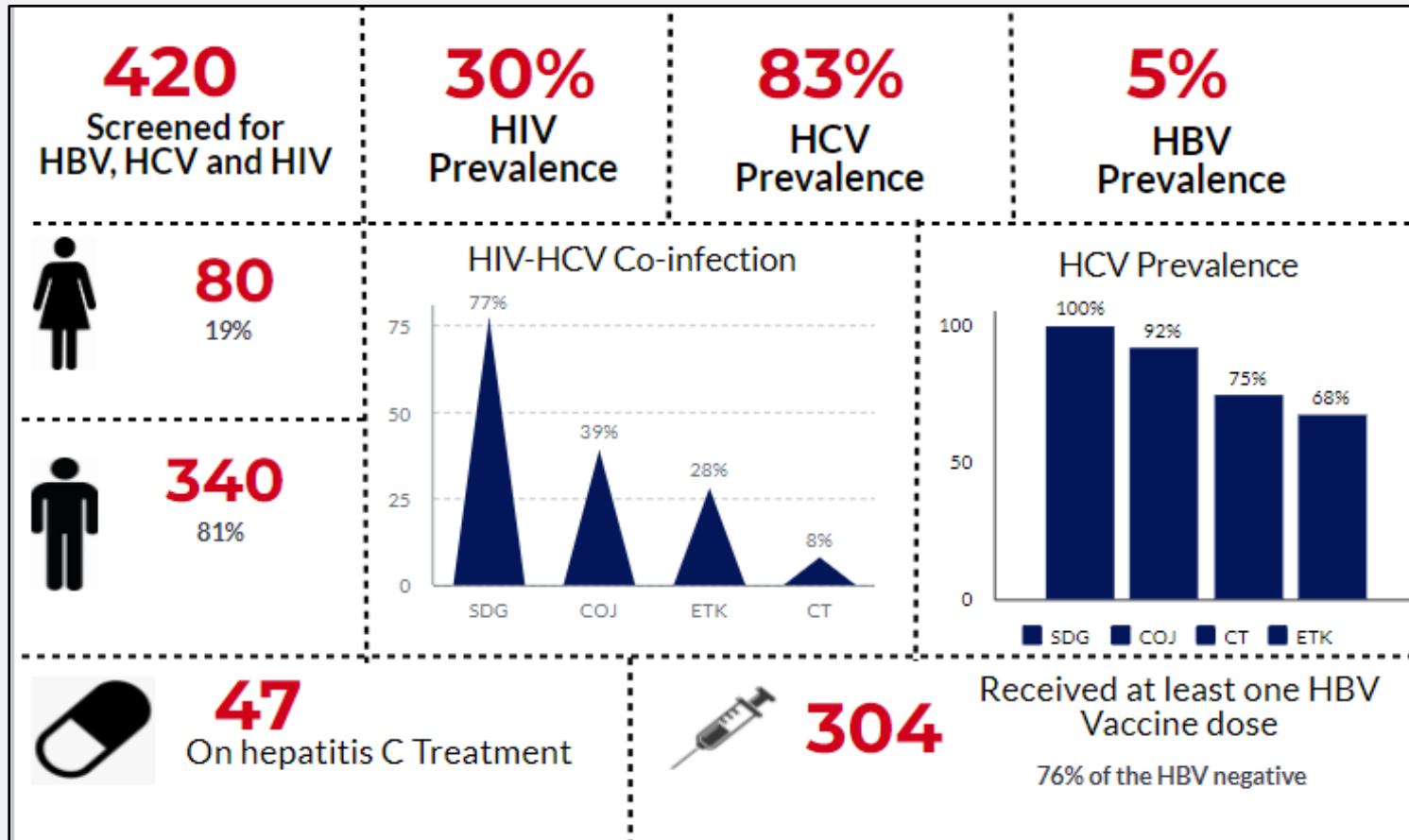
- Integrated into OST initiation process
- Screening: anti-HCV rapid test
- HCV confirmation if HCV+ve
- HCV work-up if HCV VL+ve
 - ALT, ALT, platelets
- HCV treatment: sofosbuvir/daclatasvir – 12 weeks
- Complicated cases discussed on virtual platform with hepatologists & harm reduction specialists (ECHO)



HBV

- Integrated into OST initiation process
- Screening: HBsAg rapid test
- HBV vaccine if HBsAb –ve
- Referral if HBsAg +ve

VIRAL HEPATITIS B/C



Successes:

- Partnership with Groote Schuur Liver Clinic enabled Section 21 application for DAAs.
- For the first time ever, we have good data on HCV prevalence (83%) across our OST clients.
- Treatment uptake is good with 89% of those confirmed HCV positive initiated on DAAs.
- 50% of those on DAAs have successfully completed treatment.
- Move from NHLS to Pathcare improved results turnaround time and increased initiations.

CHALLENGES

- Limited access to DAAs – brought in through importation permit while none were registered, now registered, but expensive with DAAs not being listed on Essential Medicine List of South Africa and NGOs not eligible for public sector pricing
- HCV PCR only done at certain NHLS sites so bloods needed to be transported which resulted in losing bloods.
- NHLS - delayed turn around time and loss of results which led to inability to provide full results to clients and initiate on DAAs.
- Challenges with NHLS resulted in resistance from clients to repeat bloodwork.
- Delayed recruitment of nurses and increased volume of resignations from clinical staff with Drs working flexi hours – leading to a loss of potential initiations.
- Delays in capturing confirmed HCV positive from lab results in the data capturing system –delaying initiation on DAAs.
- Limited investment in harm reduction and viral hepatitis services, with threats to sustainability due to reliance on donor funds (Global Fund)
- DAA retention challenges:
 - Some clients stating not being ready
 - Same difficulties of retention with DAAs as with OST.
 - Side effects and taking the medication without a meal.
 - Psychosocial support important.



THANK YOU

We're stronger, together.



NACOSA

COLLECTIVELY TURNING THE TIDE
ON HIV, AIDS AND TB

Nacosa.org.za