



# Eradicazione dell'HCV nei PWID in Italia

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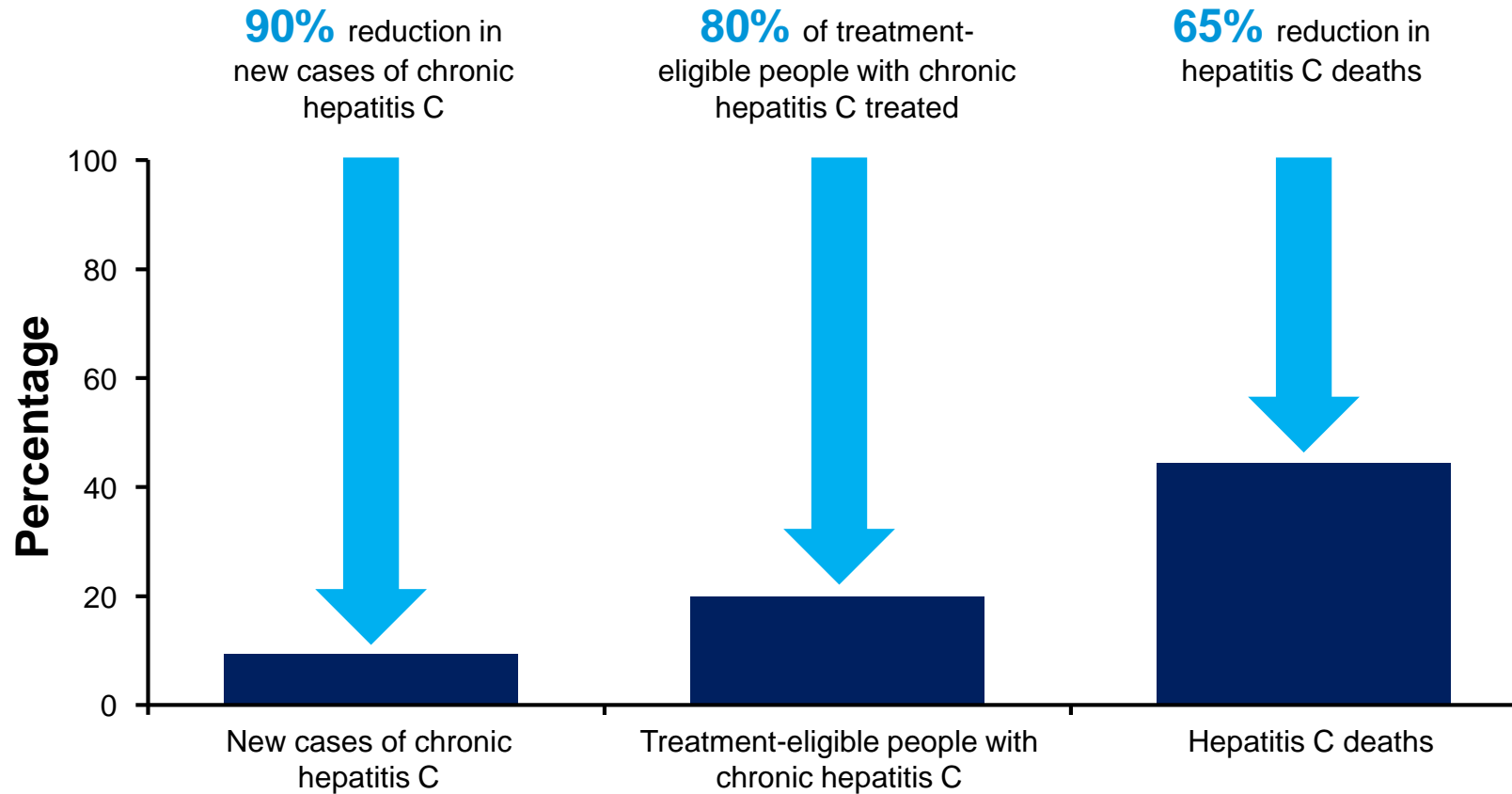
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# Ambitious global targets have been set by the WHO in order to control viral hepatitis by 2030



# Strategies for HCV infection screening

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HCV screening approach	Populations
Risk-based approach	Populations with higher seroprevalence or with high risk of infection in order to cure positive patients and to prevent HCV transmission (micro-elimination approach)
Birth cohort screening	It may be applied to specific identified birth cohorts of older persons at higher risk of infection within populations that have an overall lower prevalence
General population screening	In population with anti/HCV seroprevalence $\geq 2\%$ or $\geq 5$ . All adults have access to and be offered HCV serological testing with linkage to prevention, care and treatment services. It should be a part of a coordinated National Action Plan.

# The Micro-elimination of HCV

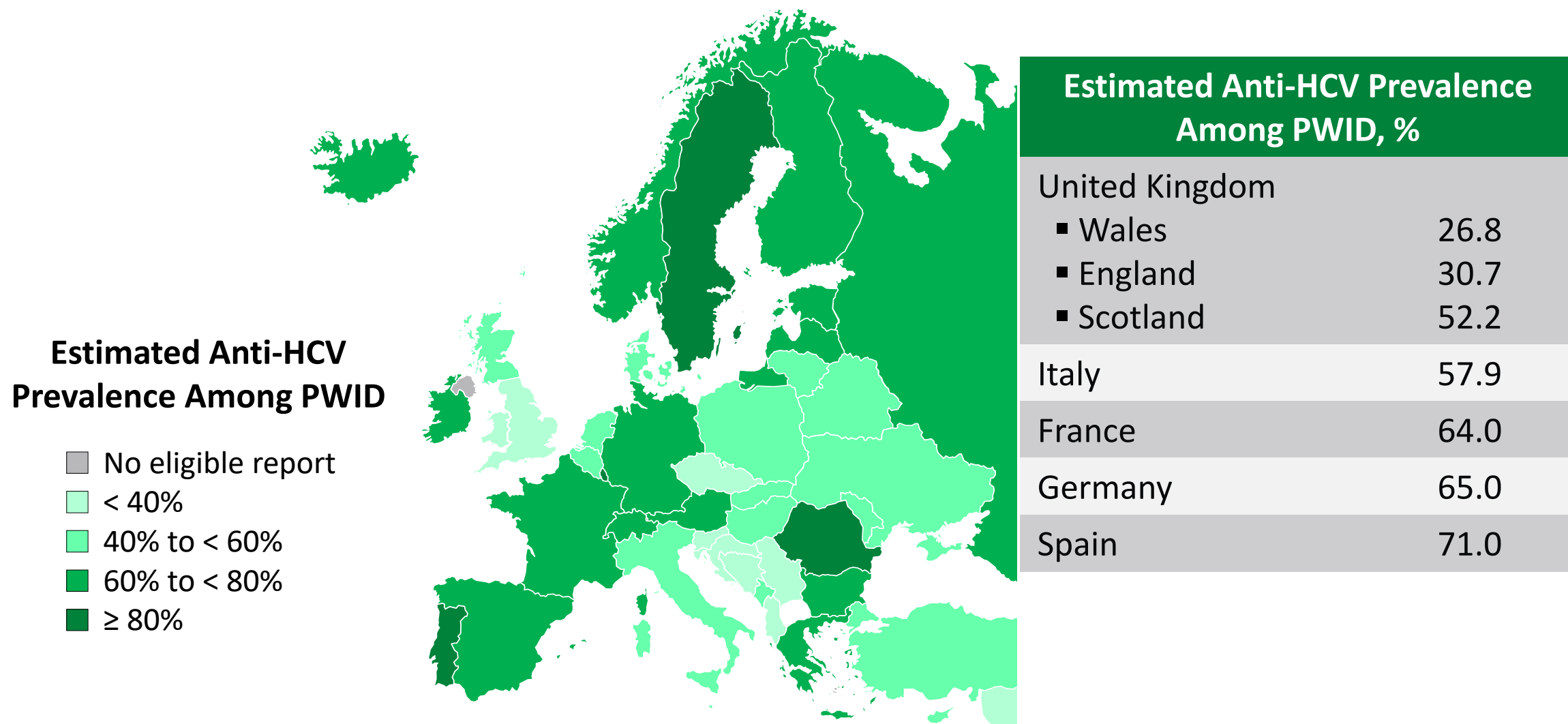
achieving elimination in targeted populations groups or geographical areas

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Which population should be targeted?

- People who injected drugs
- Prisoners
- Children of HCV-infected mothers
- Hemodialysis recipients
- HIV/HCV coinfecting people
- Migrants from high prevalence countries
- Aboriginal and indigenous Communities
- People with hemophilia and other inherited blood disorders
- Transplant recipients

# How Common Is HCV Infection Among PWID in Europe?

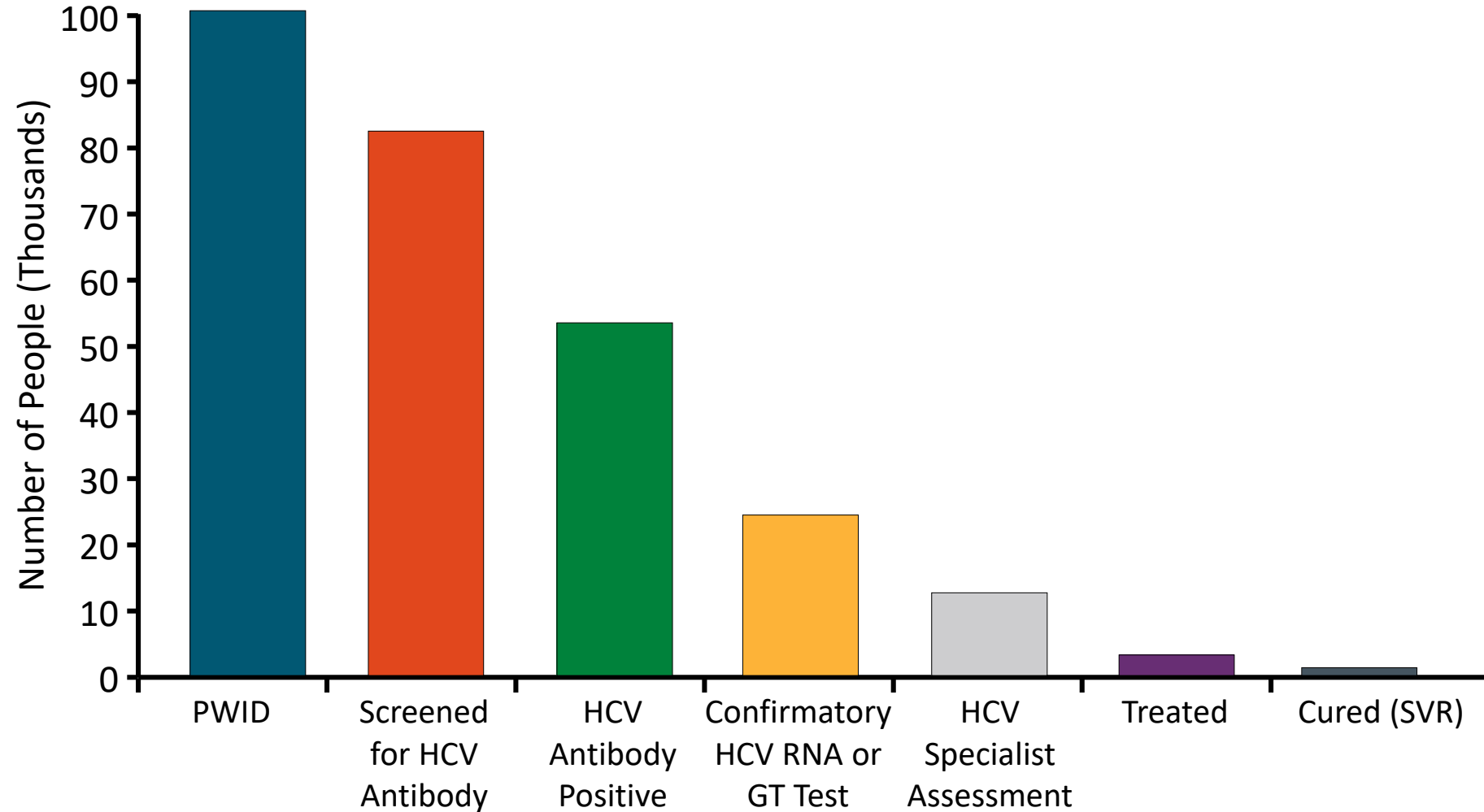


# In Italia?

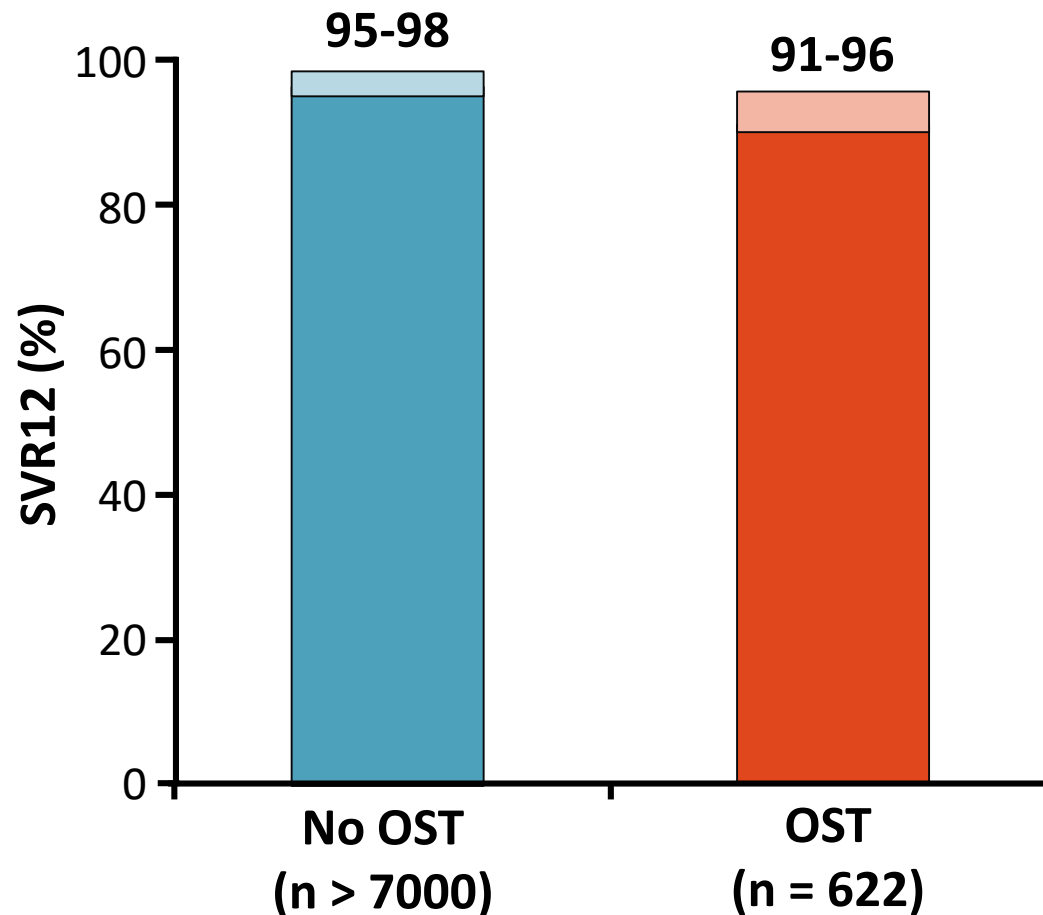
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- Mancanza di dati epidemiologici solidi : solo stime ..approssimative
- Grebely, Addiction 2019  
Prevalenza di infezione HCV nei PWID: 43,4% (38,8 – 48,1)  
N. di PWID con infezione HCV: 148.000 (98.000-205.000)
- Dati EPAC –ONLUS 2018  
pazienti con infezione NON diagnosticata: 70.000-130.00 di cui PWID  
29.000-46.000
- Screening per anti-HCV nei PWID afferenti ai SerD intorno al 25%

# HCV Care Cascade Among PWID



# Treating This Patient's HCV Infection: SVR Rates High Among PWID, Even With Ongoing IDU



**SVR12 rates also > 90% among patients with current/recent IDU**

- 90.4% in C-EDGE CO-STAR (n = 136)
- 94% in SIMPLIFY (n = 102)
- 98% in pooled analysis from 6 phase III trials (mITT; n = 63)



# Quali Barriere allo screening anti-HCV da parte dei PWID e quali soluzioni?

- Barriere logistiche: scomodità, mancanza di tempo mancanza di mezzi di trasporto per recarsi al laboratorio
- Barriere a livello individuale: scarsa conoscenza dell'epatite C e della sua storia naturale delle modalità di trasmissione e dei rischi per la salute; paura dei risultati
- Scarsa fiducia nel Sistema Sanitario

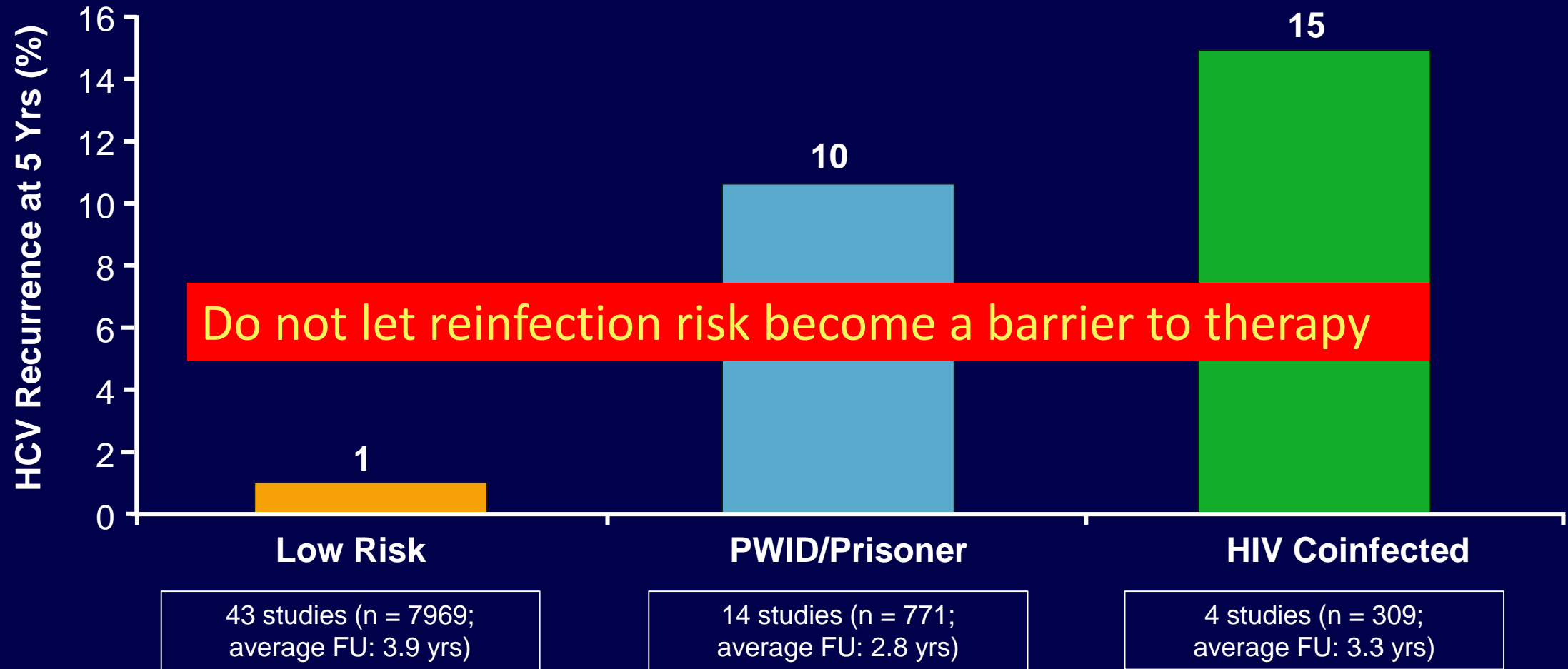
Possibili soluzioni: - sensibilizzazione dei PWID  
- semplificazione del percorso diagnostico  
- creazione di un *point of care* a livello del territorio

# Le barriere da superare..... nella realtà italiana

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- Scarsa sensibilizzazione del personale dei SerD
- Frequente impossibilità di eseguire il prelievo o l'anti HCV localmente
- Valutazione pretrattamento richiesta ( tests di laboratorio, genotipo HCV, Fibroscan) troppo complessa
- Restrizione della prescrizione e somministrazione dei DAA agli specialisti e agli ospedali
- Difficoltà di riferimento del paziente ai centri prescrittori
- Ritiro della terapia ogni mese presso la farmacia ospedaliera

# HCV Reinfection Over 5 Yrs by Study Population



# The tools to achieve HCV elimination: the 3 pillars

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## Prevention Strategies

- Harm reduction
- Needle/syringe programs
- Opioid agonist therapy
- Education, awareness

## Simple Testing and Diagnosis

- Available blood tests
- Point-of-care tests
- Reflex testing

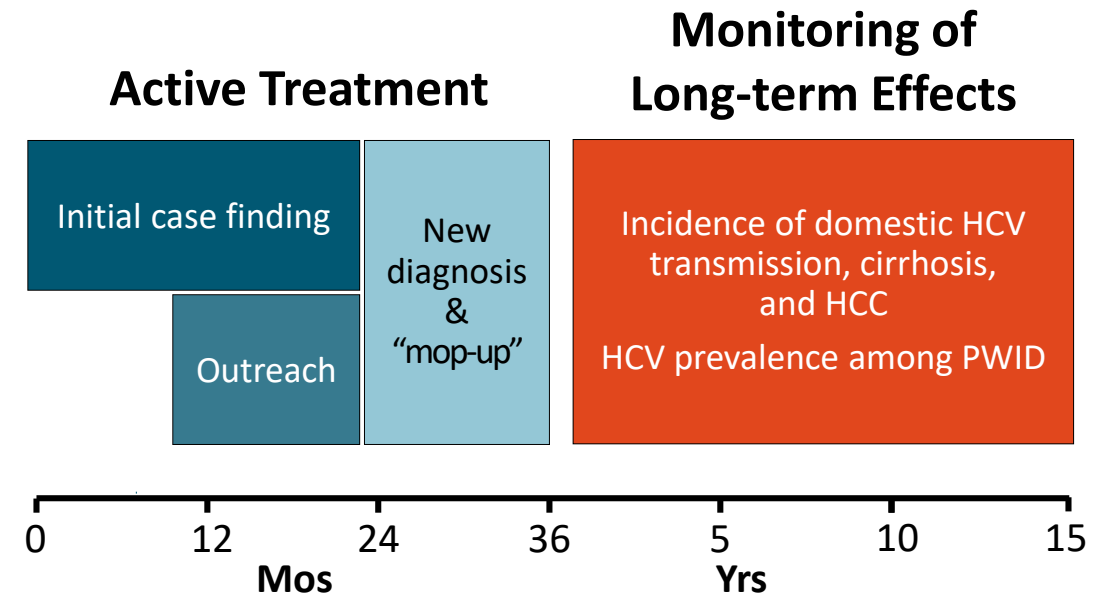
## Effective Care and Treatment

- 1-3 pills/day for 2-3 mos
- Cure rates > 95%
- Follow-up
- Education

**Combined, these tools can be used to eliminate hepatitis C as a public health problem**

# TraP HepC: Nationwide HCV Treatment as Prevention Programme in Iceland

- Iceland has a population of 340,000 with universal health insurance
  - Registry of HCV diagnoses available since 1991
  - Estimated HCV prevalence in 2014: 0.3%
- TraP HepC designed to prevent HCV spread by providing DAA therapy to all HCV PCR positive residents of Iceland, Jan 2016 to Jan 2019
  - SOF/LDV ± RBV through Oct 2016, then SOF/VEL
  - Emphasis on PWID, the incarcerated, patients with advanced liver disease
  - Collaboration across ID, hepatology, and addiction medicine specialties



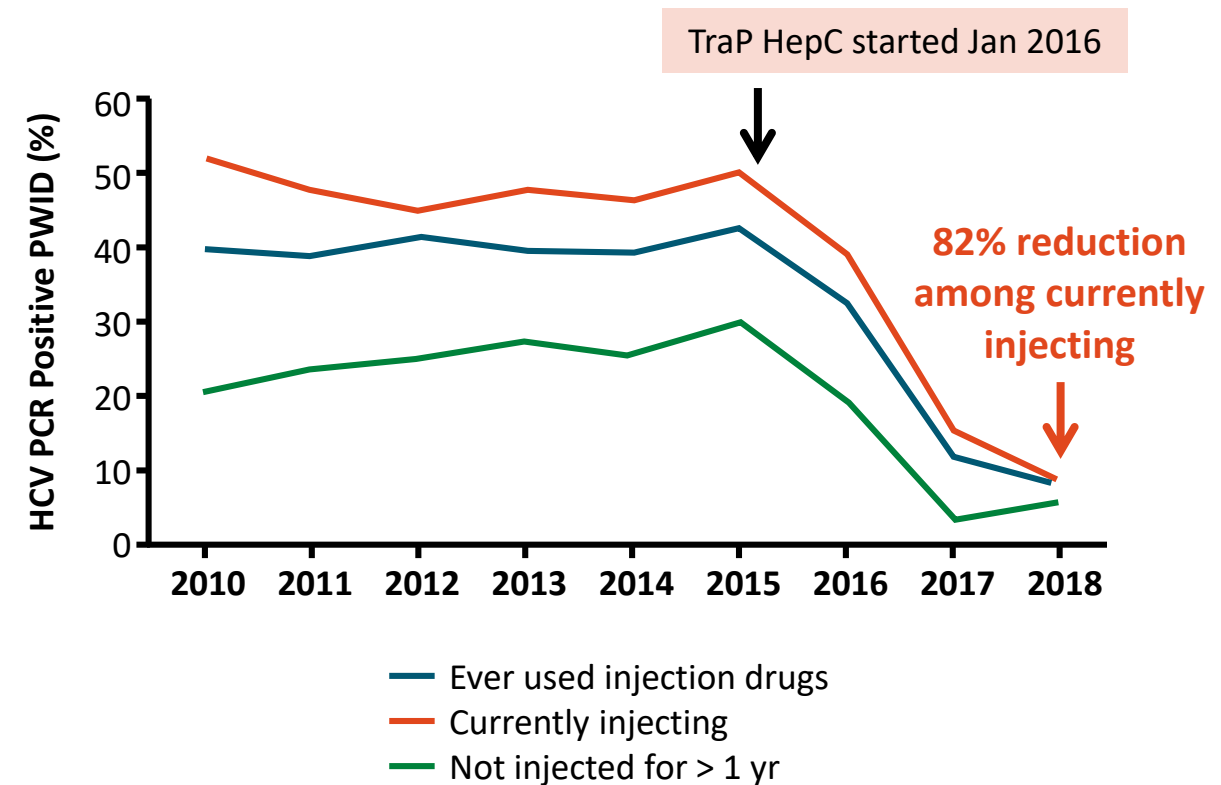
SVR12 by Population, %	TraP HepC
ITT (N = 631)	89.2
■ IDU in past 6 mos	82.9
■ No IDU in past 6 mos	92.4

# TraP HepC: HCV Treatment as Prevention Program in Iceland

## Reduced Incidence in 2 Yrs

- Dramatic reduction in community viral load and HCV incidence in only 2 yrs
- Between 2015 and 2017:
  - **55% reduction** in incidence of total new HCV infections
  - **73% reduction** in HCV PCR positive (ie, viremic) PWID
- Successful real-world example of treatment as prevention

Trends in Prevalence of HCV Viremia



# Verso il traguardo dell'eliminazione del virus C



Ma dobbiamo scovare il sommerso e trattarlo!

Eliminare il virus C sarà l'impegno e il lavoro di ciascuno di noi





# Disease Eradication vs Elimination vs Control

- **Eradication:** permanent reduction to zero of the worldwide incidence of infection; intervention measures no longer needed
  - Only 1 example: smallpox
- **Elimination:** reduction to zero of incidence in a defined geographical area as a result of deliberate efforts; continued intervention measures required
- **Control:** reduction in the incidence, prevalence, morbidity, or mortality of an infectious disease to a locally acceptable levels; continued intervention measures required