

Hepatitis C Treatment and Residential Program Participation are the Two Compatible? A Case Study of Hepatitis C treatment at WHOS (We Help Ourselves).

ATCA Melbourne 2016

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WHOS TC Services

- **Gunyah for men**
- **New Beginnings for women**
- **OSTAR (Opioid Substitution Treatment to Abstinence) mixed gender**
- **RTOD (Opioid Treatment Stabilisation) mixed gender**
- **WHOS Hunter Valley (mixed gender)**
- **WHOS Sunshine Coast (mixed gender)**
- **WHOS Newcastle Day Program - OST**



RTOD

Admissions

OSTAR

GUNYAH

**Community
Cafe**

**NEW
BEGINNINGS**

**WORKSHOP/
GARDENING**

OSTAR2

**DAINTREE/JACARANDA
MENS TRANSITION**

**RECREATION
HALL**

**WHOS
HQ**

**PEPPERCORN
EXIT HOUSE**

**TREETOPS WOMENS
TRANSITION**

Broughton Circuit

Glover St

Broughton Circuit

Chapel St

Glover St

Church St

AfterCare

Harm Minimisation

- ▶ Commitment to the HM framework since mid 80's
- ▶ Ensuring health gains whilst in treatment
- ▶ Implementing Harm Reduction strategies
- ▶ Secondary NSP in all services – because of BBV

WHOS Harm Reduction Initiatives

- ▶ Harm Reduction Workers provide education on overdose prevention/CPR, HIV & HEP C, Safe Sex and infection control
- ▶ Harm Reduction Nurse at Rozelle coordinates;
 - Sexual health, BBV screening and referral to treatment; Onsite Women's Health Clinic
- ▶ Onsite Liver Clinic/ Hep C treatment/Hep B

WHOS Liver Clinic

- ▶ In partnership with the Royal Prince Alfred Hospital Liver Clinic
- ▶ Providing Fibroscan onsite at WHOS Rozelle since 2014
- ▶ Treatment prior to March 2016 – not whilst in program
- ▶ Referral to the RPAH Liver Clinic post rehab

New Treatments

- ▶ **PBS approval March 2016**
- ▶ **Clients wanting treatment**
- ▶ **Public Health message – treat everyone**
- ▶ **Would it effect program participation?**
- ▶ **What part of the program?**

Program participation

- ▶ **TC Model – peer group dynamics**
- ▶ **Structured daily programs- Group based**
- ▶ **Progression to employability skills - Transition**
- ▶ **Outreach programs, working, training - Exit**

Reservations

The Old Treatments



Program Participation



Consultation & Education

- ▶ **WHOS Managers consulted**
- ▶ **Education session for Managers – RPAH Liver Clinic**
- ▶ **Education session for Harm Reduction Workers – Hep C NSW**
- ▶ **WHOS Nursing staff training – ASHM/RPAH Liver Clinic/Hep C NSW**
- ▶ **Clients consulted and Education provided from HEP C NSW**

Outcomes of Consultation

- ▶ All managers in agreement
- ▶ Clients were keen to get treatment
- ▶ Decision to start with more senior clients post core program i.e. 90 days onwards
- ▶ Aim for approx 10 clients for induction per month
- ▶ Side effects to be monitored weekly

Treatment pathways

- ▶ Existing Liver Clinic onsite in partnership with RPAH – Fibroscan
- ▶ All screening and referral for treatment coordinated by Harm Reduction Nurse with WHOS visiting GP's
- ▶ Liver Clinic Doctors attending onsite to prescribe
- ▶ Liaison with community pharmacy – would they supply the drugs – Cost+++

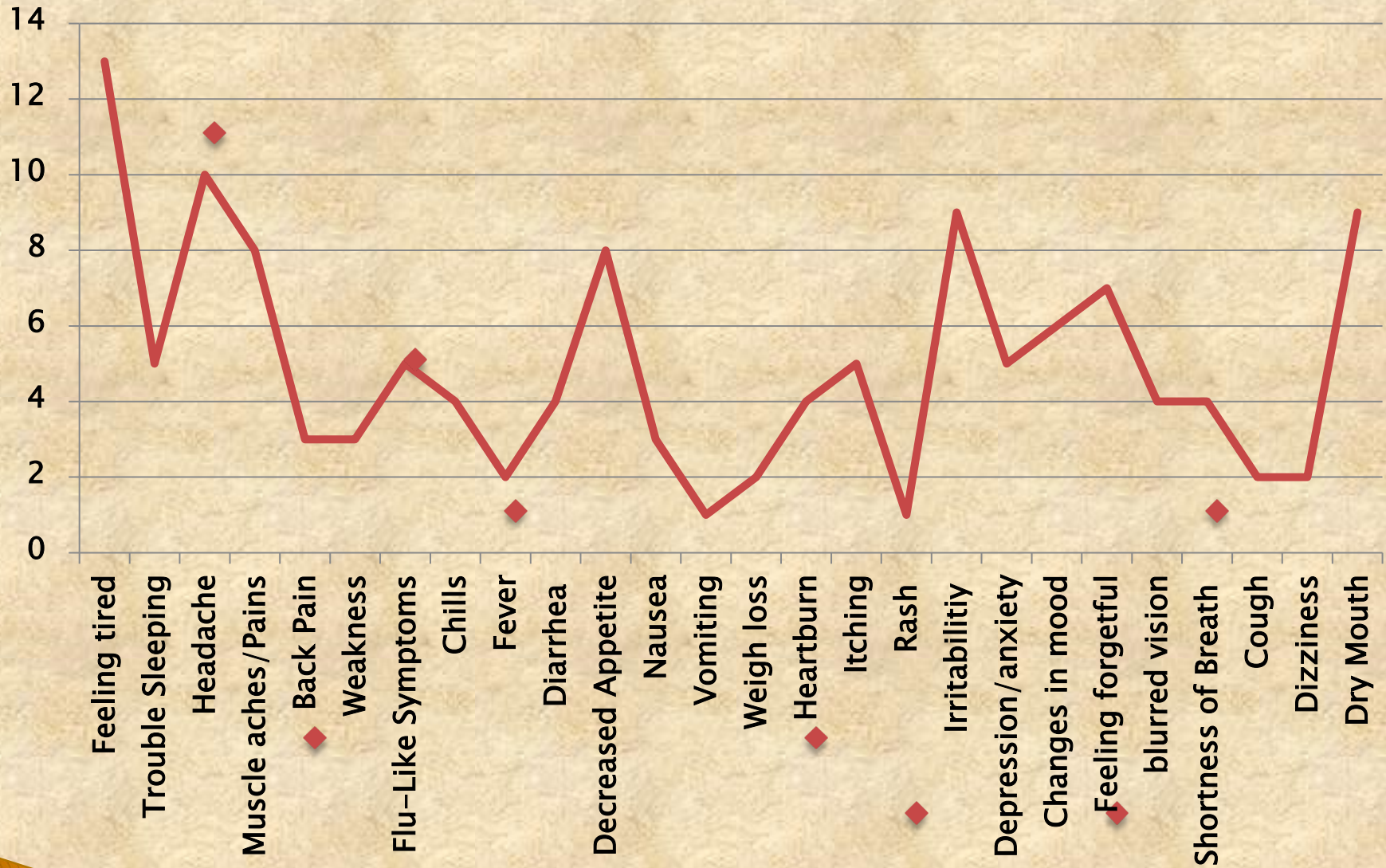
Characteristics of treatment

- ▶ One person requiring Ribavirin – Genotype 2b, all others Genotype 1 & 3 – new meds
- ▶ Fibroscan readings ranged from 3.5 – 20
- ▶ Most treatment duration 8-12 weeks; 1 @ 26 weeks
- ▶ Decision not to treat other genotypes 4 -6 with old medications – new treatments coming
- ▶ A mixture of abstinent and OST clients

Reported Side effects

- ▶ Sample size – First 18 clients on treatment
- ▶ Weekly monitoring
- ▶ Side effect free – Not quite
- ▶ Manageable – Yes
- ▶ Most side effects reported as slight the less you ask the less the side effects
- ▶ Several reported no side effects

Side effects



Managing side effects

- ▶ All but one client was managed with OTC symptomatic relief medication e.g. panadol
- ▶ Drink Water +++
- ▶ One client developed a fibromyalgia form of pain – older client with cirrhosis
- ▶ Drug interaction website Hep Drug Interactions
<http://www.hep-druginteractions.org/checker>

Progress

- ▶ Since March 2016 – 32 initiated on to treatment and 3 entering WHOS on treatment, Rozelle only
- ▶ Other WHOS TC's work with local liver clinics and now have clients on treatment
- ▶ Retention excellent whilst on treatment
- ▶ Treatment can commence earlier in program
- ▶ All clients so far have cleared

Conclusion

- ▶ **Hepatitis C Treatment and program participation compatible – YES**
- ▶ **Should clients be able to access Hep C treatment whilst in program – Absolutely**
- ▶ **Public Health is blanketing treatment – reduction/eradication**

Acknowledgements

- ▶ **RPAH Liver Clinic**
- ▶ **Nurses – Magda Gawdry and Laura Murray**
- ▶ **Dr. Paul Haber**
- ▶ **WHOS Managers and Staff**