

BACKGROUND

Surveillance data in Indiana has shown that there is a significant proportion of Hepatitis C Virus (HCV) cases among young, suspected Intravenous Drug Users (IDU). Due to minimal services and other factors such as lack of interests in testing and stigma, many of these individuals remain unaware of their infection status.

Despite having received all the necessary testing for HCV, rapid and confirmatory testing, and regardless of infection status, few individuals seek medical care. It is often unknown, by the individuals tested or within a community, which providers will see these patients. One aim of this project is to establish linkage to care channels that will facilitate persons with an HCV infection in seeking further care.

Routine surveillance data in 2014, and years prior, from the Indiana National Electronic Disease Surveillance System (INEDSS), indicated that the central region of the state bordering Ohio had high rates of HCV. The Indiana State Department of Health (ISDH) enhanced their relationship with a testing facility, and a Local Health Department to implement a pilot project to provide testing and link individuals to care within their community.

It is noteworthy that this area of the state is rural and healthcare resources are limited.

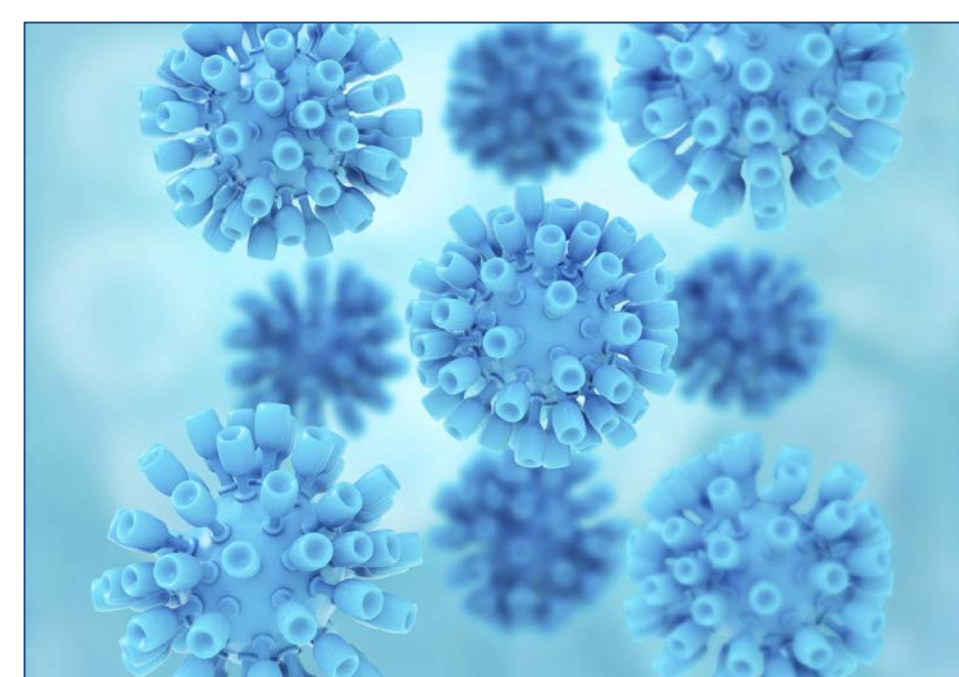


Figure 1. pictures of Hepatitis C virus

OBJECTIVES

The ISDH collaborated with a mental health center including substance abuse services, and a local health department in rural Indiana to...

- ❖ Increase Hepatitis C Virus (HCV) testing of high risk individuals
- ❖ Increase the proportion of people aware of their HCV infection status
- ❖ Link those individuals that tested HCV positive to care

METHODS

Partners

❖ Testing Site

Aspire Indiana is a sub-award of the Special Populations Support Program (SPSP), offering disease prevention and supportive care. Aspire is a non-profit comprehensive community mental health center providing a full continuum of services, including behavioral healthcare, substance abuse treatment, HIV care coordination, etc. for at-risk populations. The SPSP is a program of the HIV Division of the Indiana State Department of Health.

❖ Referral Site

Union County Health Department is one of Indiana's local health departments in a region of the state known for high risk behaviors for hepatitis C including injection drug use.

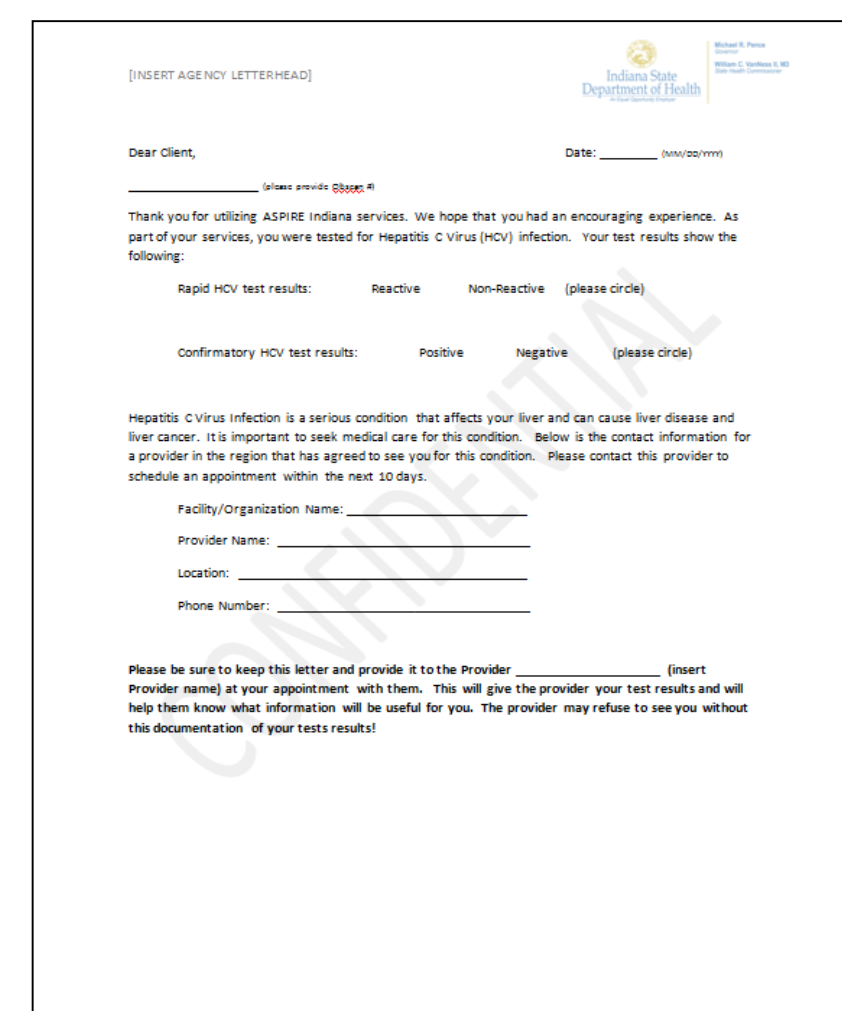


Figure 2. Letter provided to individuals tested at test site.

Hepatitis C Virus (HCV) Testing and Referral Flowchart

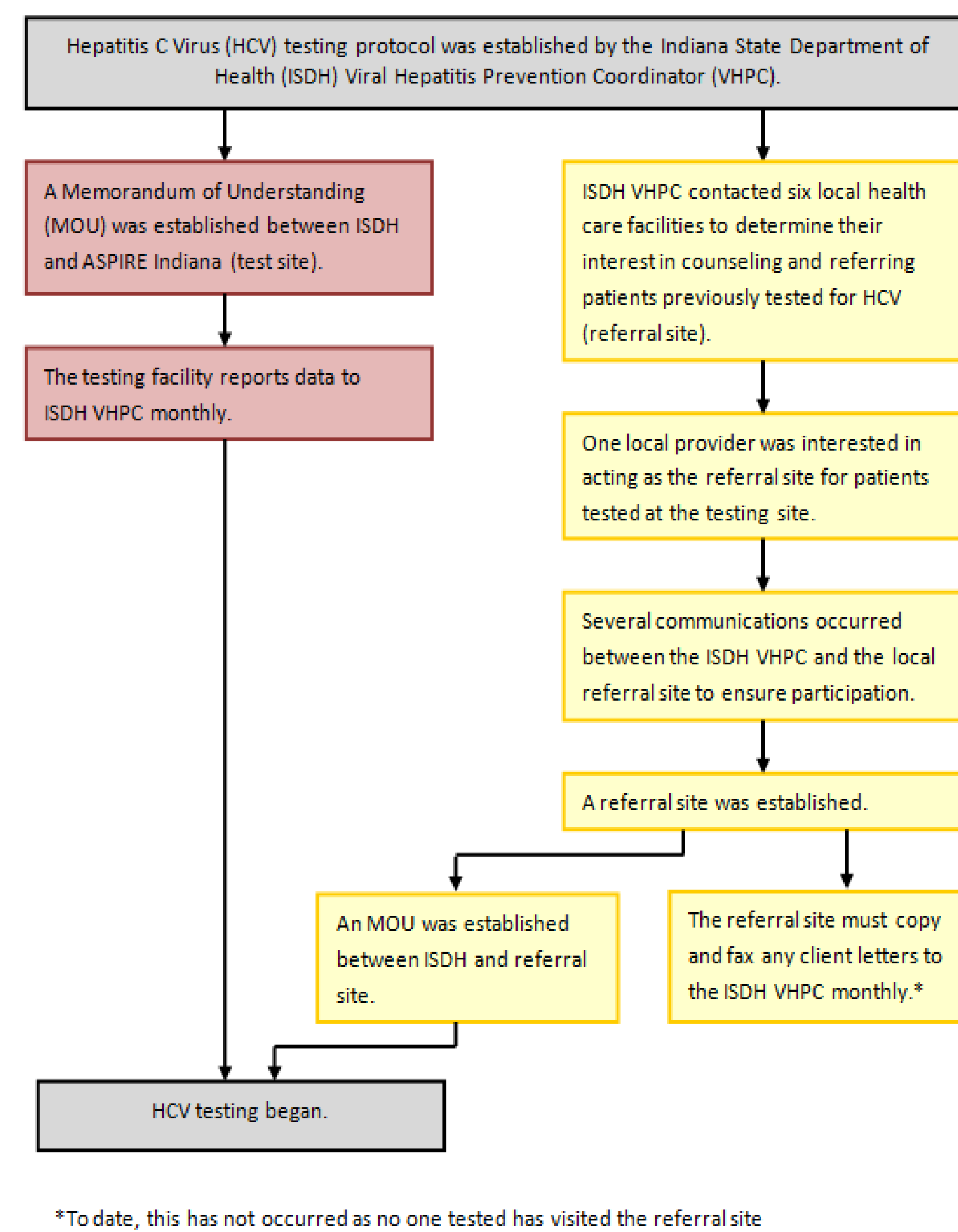


Figure 3. Testing and Referral Establishment Flowchart

RESULTS

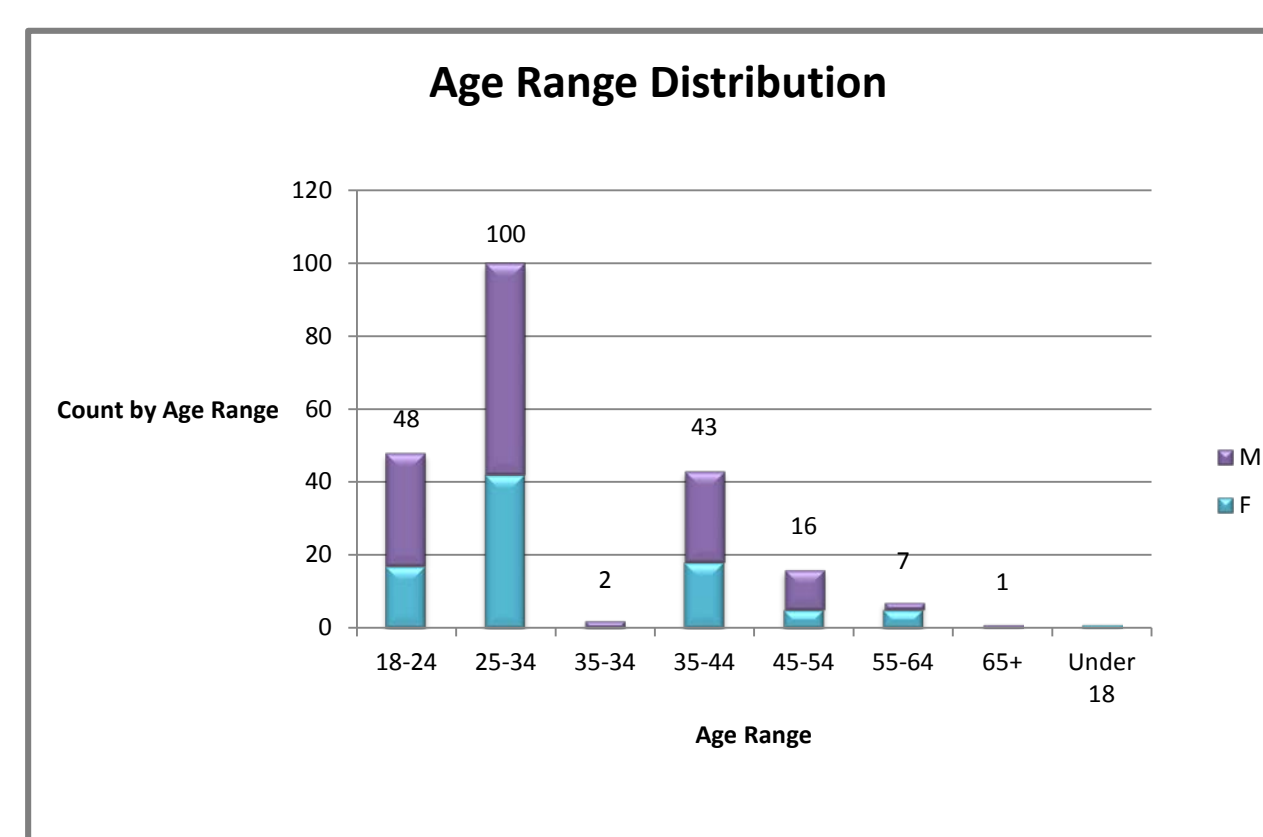


Figure 4. Count of Individuals Tested by Age Range and Gender

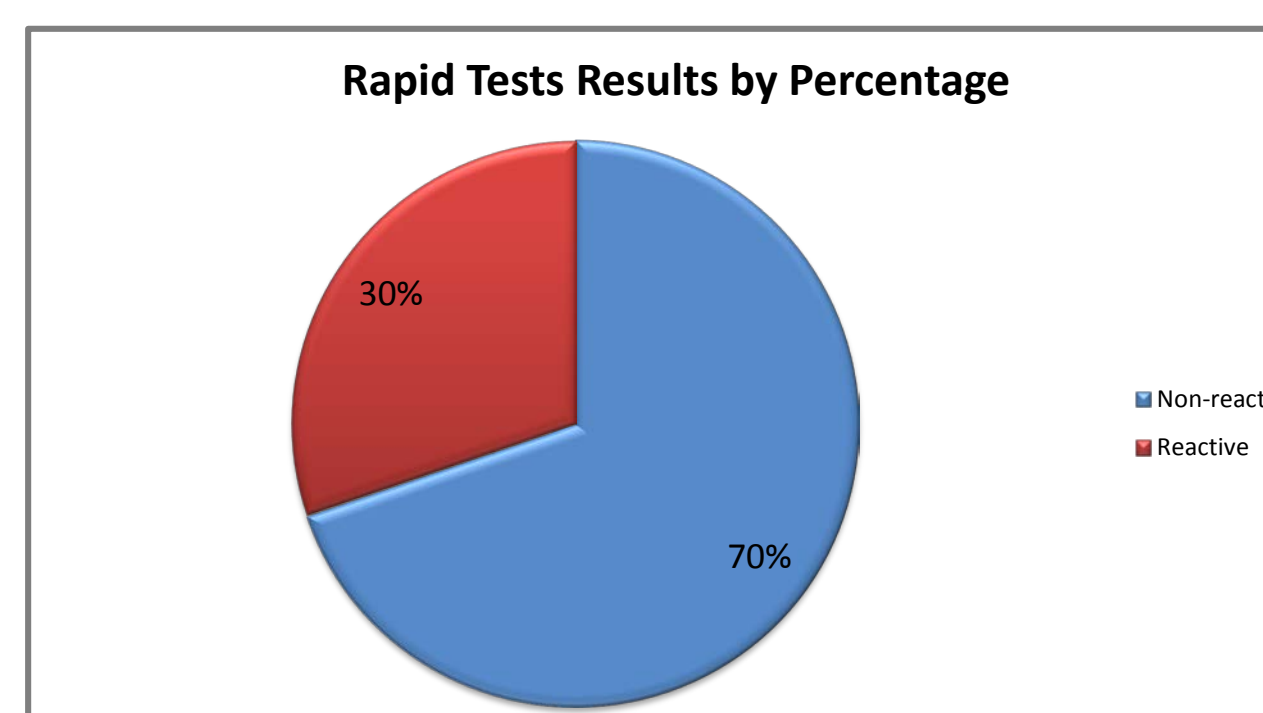


Figure 5. Rapid Tests Results by Percentage

- ❖ Data collection began on October 21, 2014 and is ongoing.
- ❖ Data shown here is through January 31, 2015.
- ❖ 219 individuals were tested from October, 2014 to January, 2015.

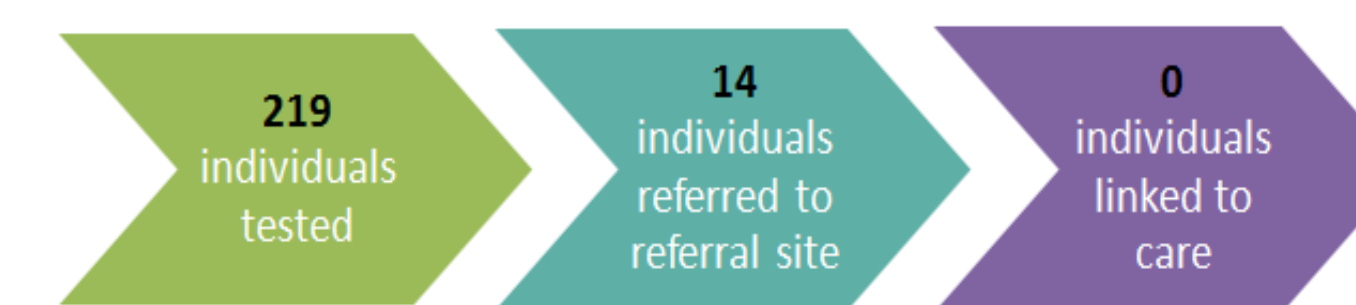


Figure 7. Linkage to Care

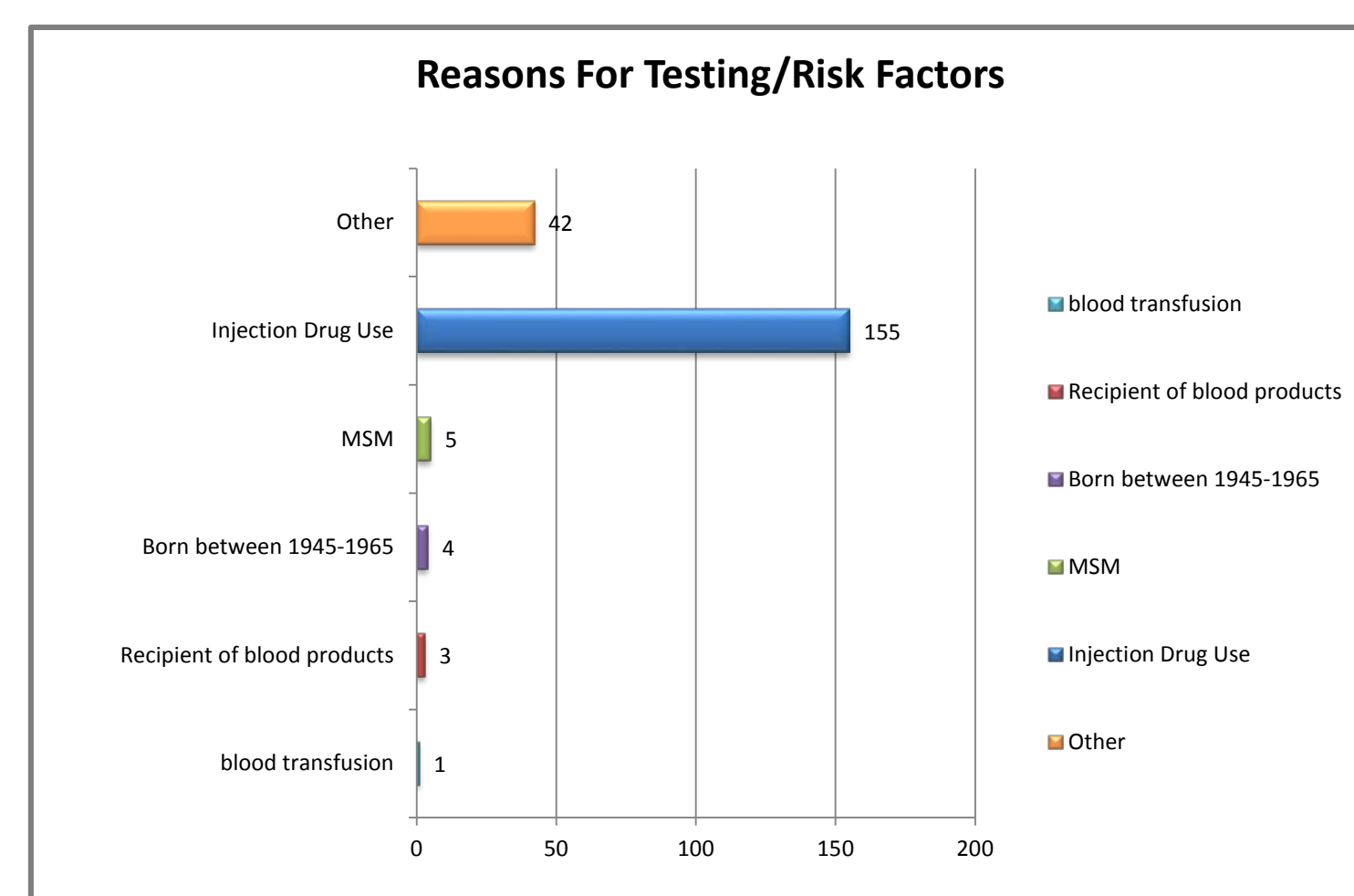


Figure 6. Reason for Testing/Reported Risk Factors

- ❖ There is no data representing the number of individuals linked to care...
 - No individuals have sought further care from the Referral Site, Union County Health Department.
- ❖ Currently, 14 referrals have been made.

CONCLUSIONS

- ❖ Testing individuals for HCV should be complemented with linkage to care channels. Care is essential for hepatitis C virus infection. Linkage to Care channels should be developed through partnership and collaboration with stakeholders including hospitals, local health departments, federally qualified health centers (FQHC) and the Centers for Disease Control and Prevention (CDC).
- ❖ Linkage to Care channels should be established locally to promote and encourage individuals to seek care for their HCV infections. Within their communities.
 - Despite an established linkage to care channel and knowledge thereof, individuals with HCV infections, in this project, still hesitated to seek care.

LIMITATIONS

- ❖ This is a small regional study and thus participants are not representative of the entire state. Therefore, the results are not generalizable to the state of Indiana.
- ❖ Data collected on risk factors/reason for testing, ethnicity, and age was all based on self-report.
- ❖ The participating referral site only agreed to see patients from their county.
 - Individuals may have been interested in seeking care but was not a resident of the referral site.
- ❖ Physicians and healthcare facilities are reluctant to refer/treat for HCV due to costs of treatment.
- ❖ The data is still being collected, thus, all data and conclusions are preliminary.
- ❖ Participants were not followed beyond the referral site, thus no data on use of the linkage to care channel was collected. Limited use of the linkage to care channel cannot be explained based on current data.

FUTURE DIRECTIONS

- ❖ The Viral Hepatitis Prevention Coordinator (VHPC) is dedicated to establishing more linkage to care channels within this region of the state to further promote care and treatment of HCV.
- ❖ Linkage to Care channels are crucial for those individuals testing positive for HCV and should be established at a local level.
- ❖ The VHPC plans to share this process and lessons learned with other state VHPC's and with national partners through presentations.

ACKNOWLEDGEMENTS

This project along with the testing would not have been possible without the dedicated efforts of the testers at ASPIRE Indiana, the willingness to participate from Union County Health Departments and the Centers for Disease Control and Prevention for providing funding for the rapid tests.