

Acceptability and implications of rapid HCV testing among high risk young injection drug users

Kimberly Page, Ph.D., MPH November 27, 2012 University of California, San Francisco 2012 National Summit on HIV and Viral Hepatitis Diagnosis, Prevention and Access to Care

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- Estimated 50% to 75% of the those infected with hepatitis
  C virus (HCV) have not been tested in the U.S.
- People who inject drugs (PWID) are at highest risk of infection in the U.S., with limited access to HCV testing
- Newly available, FDA approved, and accurate rapid pointof-care anti-HCV testing, coupled with post-test counseling in community-based settings can help accelerate the identification of HCV infections

## Methods

- The UFO Study enrolls young young adult (<30 years) active (injected in past 30 days) into prospective follow up.
- Baseline research visit included the choice between two anti-HCV tests: Rapid (fingerstick) or EIA (venipuncture)
- Short questionnaire assessing participant's perception of its accuracy, preferred testing procedures, and reasons for said preferences.
- Blood samples were collected to ascertain HCV viremia status
- All participants received preand post-test risk reduction counseling



## Results

- 75% chose the RAPID test
- There were no differences in characteristics or anti-HCV status between *rapid* and *standard* test-takers

Perceptions of HCV Rapid test vs. Standard HCV test:

- 62% *believe* the HCV rapid Test is *as or more* accurate
- Of those, most (39%), because both procedures require blood
- Of those who *believe* HCV rapid Test to be less accurate, most (56%), because the test is 'too fast', or 'too new'

... and

- 95% of participants would recommend the rapid test to a friend
- 78% of those who chose HCV rapid test prefer it over HCV Standard

## Acceptability of anti-HCV rapid test

Variable	%
Main reason for choosing rapid test: Wanted fast results Rapid test is more convenient Rapid test requires less blood Rapid test is less stressful Other reasons	63.2 10.5 10.5 5.3 10.4
Compared to Standard blood draw, getting a fingerstick was: Much less painful Less painful About the same amount of pain More painful	36.4 31.8 25.0 6.9
"I found the fingerstick uncomfortable" Disagree Strongly disagree Agree Strongly disagree	40.9 29.6 25.0 4.6



- Lessons Learned:
  - Most young IDU opted for HCV rapid test and majority would recommend the procedure to a friend.
  - Knowing one's HCV status matters: of those who chose the HCV rapid test, many stated they wanted fast results in lieu of waiting for commercial lab results to return
  - Fingersticks for blood collection as a favorable alternative to venipuncture: most participants found the fingerstick less painful and less invasive
- Implications:
  - Increased awareness of one's HCV status will help prevent the spread of HCV
  - Anti-HCV rapid tests can be implemented in high volume, with timely turn-around, at relatively low cost
  - More research is needed to maximize implementation of the HCV rapid test; minimize barriers to use; and combine with HCV RNA testing when needed for high risk groups.

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- Co authors: Alya Briceño MPH, Benjamin Hayes MSW MPH, Jennifer Evans MS, Judy Hahn PhD

Kimberly Page, PhD MPH <u>KPage@psg.ucsf.edu</u> ufostudy.org