

[View this email in your browser](#)

# HCVAction

Bringing you the latest hepatitis C news and events

February 2020

## HCV Action publishes new video encouraging professionals working in hepatitis C care to get involved



[HCV Action](#) has produced a [new video](#) setting out why HCV Action was established and how it can help professionals working in hepatitis C care. The video features our Chair, Dr Steve Ryder, and HCV Action steering group member Rachel Halford, who is Chief Executive of [The Hepatitis C Trust](#), which provides the secretariat for HCV Action.

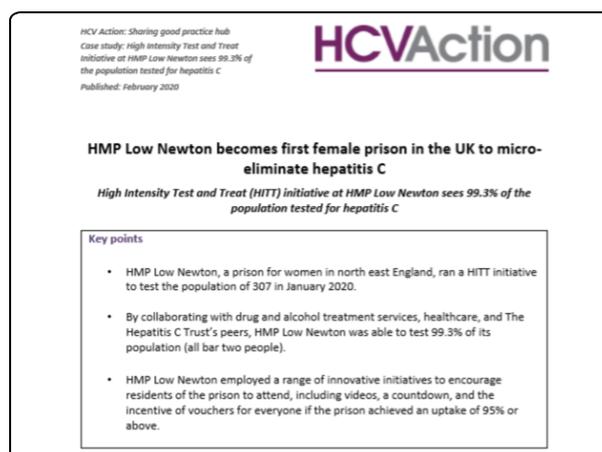
The four-minute video explores why HCV Action was initially established in 2008 and sets out its purpose to support professionals to diagnose and treat people with hepatitis C; to help prevent new transmissions; and to reduce variability of care between local areas. We hope to achieve this by publishing best practice case studies in our [Resource Library](#) on our website, bringing people together with events both locally and nationally, and sending out monthly e-updates (of which this is one!).

Rachel Halford said: 'While the UK Government has signed up to the elimination of hepatitis C by 2030 at the latest, today we're in 2020 which leaves us ten years to find the two-thirds of people [infected with hepatitis C] who haven't been diagnosed. To find those people, we need to collaborate and we need to communicate - this is where HCV Action can support us to share best practice and new practice.'

Dr Steve Ryder called for anyone who works in or knows of services delivering excellent or innovative hepatitis C care to get in touch with HCV Action so these examples can be shared as case studies to inspire others. Please do reply to this email or contact [hcvaction@hepctrust.org.uk](mailto:hcvaction@hepctrust.org.uk) to discuss this further.

---

## New case study on micro-elimination of HMP Low Newton published



[HCV Action](#) this month published [a new best practice case study](#) exploring how HMP Low Newton, a prison for women in north east England, micro-eliminated hepatitis C by running an intensive testing weekend in January 2020.

Achieving micro-elimination of the prison population, which has a high prevalence rate for hepatitis C of around one in 10 people testing positive, is crucial if the UK is to eliminate hepatitis C by 2030, as the UK Government has committed to doing.

HMP Low Newton managed to get a staggering uptake rate of 99.3% of its population, of whom 30% were antibody-positive and 8% were RNA-positive. This was achieved through various initiatives in the run-up to the event, including: videos streamed through residents' TVs explaining the test and

encouraging participation; information booklets distributed in the weeks preceding the weekend; teas and coffees after the test; and, significantly, the incentive of a £3 voucher for the resident-run hair and nail bar and other prison-run shops for everyone if the prison was able to reach the test level of 95% or more of its population.

To read about how HMP Low Newton micro-eliminated hepatitis C in more detail, please follow [this link](#).

---

## Public Health England publishes 'Hepatitis C in London' report



This month, [Public Health England](#) published its first [report](#) specifically on hepatitis C in London since 2015, providing an update on the recent epidemiology of hepatitis C in the capital.

While the report does not give an estimate of the total number of people in London with an active infection because of significant regional variation, it sets out that in 2017 London had the highest rate of new laboratory reports in England by a significant margin, accounting for nearly a third (31%) of all new hepatitis C antibody-positive tests.

It also estimates that in 2018, 63% of people who inject drugs in London have ever been infected with hepatitis C, with 41% of those ever infected having a current hepatitis C infection requiring treatment. Almost one in five (18%) of people who inject drugs are thought to be unaware of their infection, a much lower figure than the 35% thought to be unaware in England as a whole.

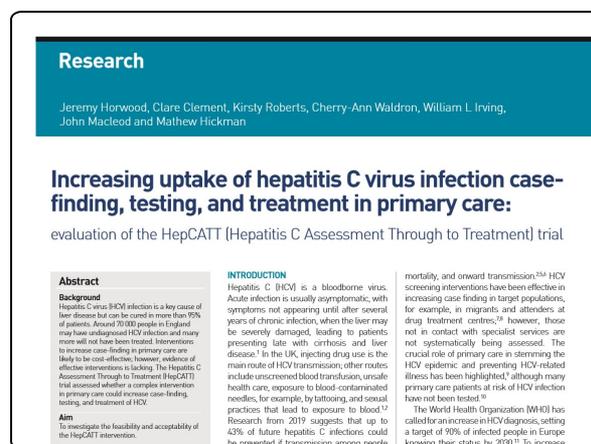
In 2017/18, 87% of eligible clients of drug treatment services received a

hepatitis C test, pretty much the same as in 2016/17. London local authorities were generally shown to have performed above the national average in testing for hepatitis C in drug treatment services, but there was still considerable variation between areas.

You can read our Twitter thread exploring some of the key statistics [here](#) and read the full report [here](#).

---

## New evaluation finds primary care plays a crucial role in identifying and treating people with HCV



A [new study](#) published this week in the [British Journal of General Practice](#) looked at a randomised control trial run in 45 primary care practices in south west England called the Hepatitis C Assessment Through to Treatment (HepCATT). The intervention aimed to increase case-finding, testing, and treatment of hepatitis C through various initiatives in primary care.

The study compares 22 HepCATT intervention sites with 23 control sites. The intervention sites saw doctors offered online HCV educational resources such as the Royal College of GP's e-learning module; hour-long face-to-face staff training on hepatitis C; posters and leaflets for patients displayed in waiting rooms; and software integrated into the electronic patient record systems, used to identify patients with risk factors for hepatitis C or patients diagnosed more than a year previously without a referral for treatment.

The evaluation found that the HepCATT intervention increased staff knowledge and awareness of hepatitis C, and that they valued the opportunity to discuss testing with patients. The audit software was said to be useful for finding patients to target for testing, though the authors recommend that wider

implementation should provide further support to cover the fees to run the algorithm and staff time to conduct the additional tests.

The study concludes that: 'The cost-effective HepCATT intervention provides primary care with a range of tools to improve the identification and care of patients with hepatitis C infection, and prevent HCV-related illness. This could help the UK to reach the WHO target of 90% of infected people knowing their status by 2030 and help to stem the HCV epidemic.'

The study can be read in our Resource Library [here](#).

---

## News and reports

\* A new study from the [Journal of Viral Hepatitis](#) has shown that heavy alcohol use is not associated with failure to initiate hepatitis C treatment or achieve cure. It concludes that people with alcohol use should be given access to DAAs. More information [here](#).

\* An article from [Infectious Disease Advisor](#) has been published which explores the link between cocaine use and hepatitis C. It recommends more prevention strategies and harm reduction initiatives among people who use cocaine. The full article can be found [here](#).

\* Research published in [Infectious Diseases Society of America](#) argues for a new approach to testing people who inject drugs for hepatitis C and HIV. Given the importance of re-testing people with an ongoing risk (i.e. people who are currently injecting drugs), the article states there should be clear guidance for services on how frequently this should be carried out and ambitious targets. It suggests a shift from patient-focused recommendations for testing towards venue-focused recommendations: rather than test each patient every 12 months, the article argues that services should test all of their patients every year in 'testing months'. Read more [here](#).

\* The [Infected Blood Inquiry](#), the public inquiry into why people were given contaminated blood and blood products on the NHS in the 80s and 90s, published two reports written by experts: one is on [psychosocial issues](#) resulting from being infected by hepatitis B, HIV and hepatitis C through contaminated blood, and the other is specifically on [hepatitis](#). Both can be found in our [Resource Library](#).

\* [Public Health England](#) published a new report on substance misuse services in prisons. This found that 35% of people starting treatment in prison substance misuse services in 2018-19 are either currently injecting or have done so in the past. Read the report [here](#).

\* Research published in the [International Journal of Drug Policy](#), involving interviews with 23 men in prison, found that hepatitis C testing in this setting fails to address the ongoing risk factors experienced by people who inject drugs in prisons. The authors conclude that health interventions in prison must address the whole person and the circumstances in which they live, not just the illness. Read more [here](#).

\* The [London Joint Working Group on Substance Use and Hepatitis C](#) has published the slides and programme from its annual conference, held at the end of January. This focused on bringing people together to identify how London can be the first global city to eliminate hepatitis C. The slides and details about the event can be found [here](#).

\* The [National Needle Exchange Forum](#) published a write-up of its latest annual meeting. Stuart Smith, Director of Community Services at [The Hepatitis C Trust](#), spoke about the move towards elimination of hepatitis C and the importance of needle and syringe programmes and harm reduction services in achieving this. More [here](#).

---

## Share good practice

If you would like your service to be featured as a good practice case study on the HCV Action website, have any news to share with colleagues, or would be interested in being an [HCV Action Ambassador](#), please send an email to [hcvaction@hepctrust.org.uk](mailto:hcvaction@hepctrust.org.uk).



Please encourage colleagues to join HCV Action for free hepatitis C related updates and tools by emailing their full contact details to [hcvaction@hepctrust.org.uk](mailto:hcvaction@hepctrust.org.uk).

Want to change how you receive these emails?  
You can [update your preferences](#) or [unsubscribe from this list](#).

---

This email was sent to [iona.casley@hepctrust.org.uk](mailto:iona.casley@hepctrust.org.uk)  
[why did I get this?](#) [unsubscribe from this list](#) [update subscription preferences](#)  
HCV Action · 27 Crosby Row · London, SE1 3YD · United Kingdom

