

## Majority of respondents to HCV Action survey concerned about achieving elimination by 2025

*June 2021 HCV Action Member Survey analysis shows opportunities and obstacles ahead for hepatitis C care*

### Key points

- Over 40 people working in hepatitis C care across the UK responded to our survey in June 2021.
- While two-thirds of respondents said they were confident about achieving elimination by 2030, only two-fifths were confident about eliminating by 2025.
- Respondents reported a mixed picture in the wake of Covid-19: some said innovations in care had led to improvements while others said the pandemic had caused a slow-down in their elimination projects.
- Three-quarters of respondents said they were aware of reinfections happening in their area, and only two-fifths said data was being collected locally on reinfections.

### Overview

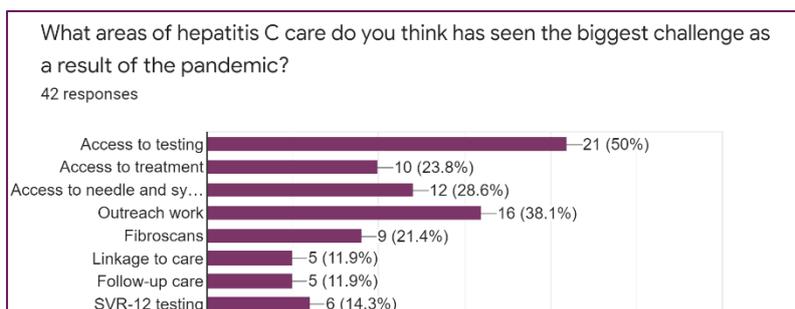
In June 2021 HCV Action developed a survey asking the hepatitis C professional community for their views about hepatitis C care in the UK. Over 40 people responded to our survey from all areas of the UK. Our findings indicate a mixed picture of how testing, treatment and other care for people with hepatitis C has changed through the pandemic. We have also heard about people's concerns and reservations on achieving elimination.

### Who responded

Our survey received responses from professionals working in hepatitis C across the UK, with a good spread across all regions in England, and responses from Scotland and Wales. We heard from nurses, peers, drug and alcohol service providers, ODN managers, Consultants and many more, with most based in the drug and alcohol service sector and secondary care.

## The impact of the pandemic on hepatitis C services

The experience of professionals working in hepatitis C care varied considerably during the pandemic. Many people told us that the pandemic had caused a slowdown in their elimination projects because of staff shortages, significant decreases in testing, fewer referrals, a reduction in awareness training sessions, difficulty starting people on treatment and reduced provision of clean injecting equipment.

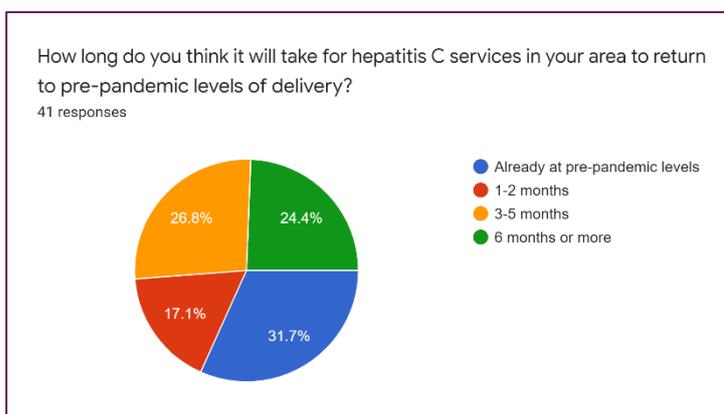


On the other hand, the pandemic led to certain improvements in care for some. People said that fewer hospital appointments being available had actually made it easier for patients to access treatment through other means, such as home visits. Innovations in

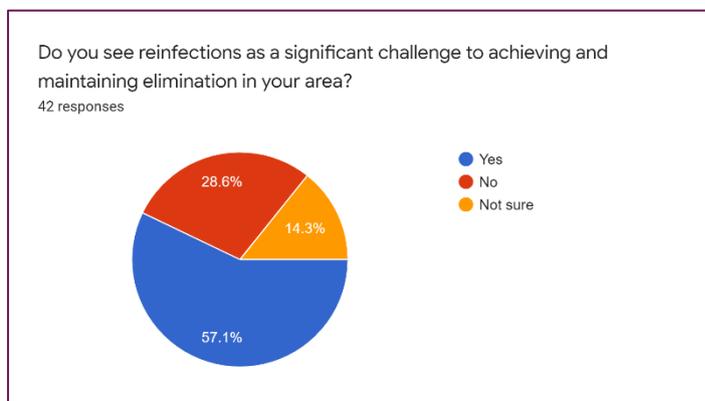
telemedicine had led to some people accessing care in a way that was more convenient for them. There had been opportunities to support people sleeping rough where they have been temporarily housed, leading to closer partnership working. Respondents said they wanted to see many of these positive changes continue, particularly outreach, multi-agency working, medication delivery and telephone assessments.

Two-thirds of respondents (66%) said access to testing had reduced or ceased entirely in the few months preceding the survey, with this being seen as the biggest challenge as a result of the pandemic, followed by disruption to outreach work and access to clean injecting equipment. Over half (53%) said access to treatment had reduced and 50% said access to needle and syringe exchanges had stopped or reduced. Outreach work was also reported to have been hard hit, as was fibroscanning, linkage to care, follow-up care and SVR testing. A fifth of respondents (20%) said staffing levels had been significantly affected by Covid-19 over the past few months, and a further 43% said it had been somewhat or moderately affected.

Around a third of respondents (32%) said their service was already back to operating at pre-pandemic levels, though one-quarter (24%) said it would take six months or more to achieve this, with others estimating between one and five months.



## Hepatitis C reinfections



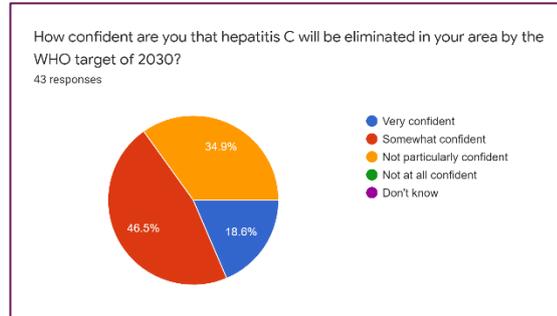
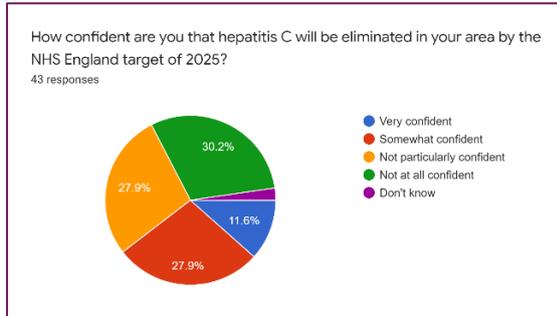
Around three-quarters of people (74%) said they were aware of someone previously treated for hepatitis C being reinfected, mostly reported among groups actively injecting, as well as some instances among men who have sex with men. Only 41% of respondents said they were aware of data collection happening to understand the current rate of reinfection. Most areas (57%) said they saw reinfections as a

significant challenge to achieving and maintaining elimination, though encouragingly 71% said there was working being done to reduce the risk of people becoming reinfected, such as greater psychosocial support, regular re-testing, better education and access to needle and syringe exchanges. The majority (57%) said they saw reinfections as a significant challenge to achieving and maintaining hepatitis C elimination in their area, compared to 19% who said they did not.

## Achieving hepatitis C elimination

When asked about financial investment into hepatitis C care in their area, equal numbers of people (35%) said there was enough and not enough investment (the rest said they did not know). 58% said they wanted to see greater funding commitment in certain aspects of care, such as a clinical outreach van, more clinical staff and peers, access to data analysis, education delivery around harm reduction and communications support. Encouragingly, 63% of respondents said they felt all services in their area were committed to eliminating hepatitis C, compared to only 19% who said they were not. Some respondents voiced concerns that drug services were under too much pressure to make BBV testing and treatment a priority.

Almost two-thirds of respondents (65%) said they were somewhat or very confident that hepatitis C would be eliminated in their area by 2030, falling to 40% feeling confident in elimination by 2025 and 58% feeling not particularly or not at all confident in that target. People ascribed this uncertainty to the need for more consistent testing, better buy-in from drug service staff and reducing rates of new infections.



## Contact

For additional details or to get more involved in our work as an HCV Action Ambassador, please contact [hcvaction@hepctrust.org.uk](mailto:hcvaction@hepctrust.org.uk).