



SYNC
2019

WHAT WILL IT TAKE TO ELIMINATE HCV AMONG SAN FRANCISCANS LIVING WITH HIV?

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POPULATION HEALTH DIVISION
SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH



CONFLICT OF INTEREST DISCLOSURE EMILY RAGANOLD, B.S.

- None

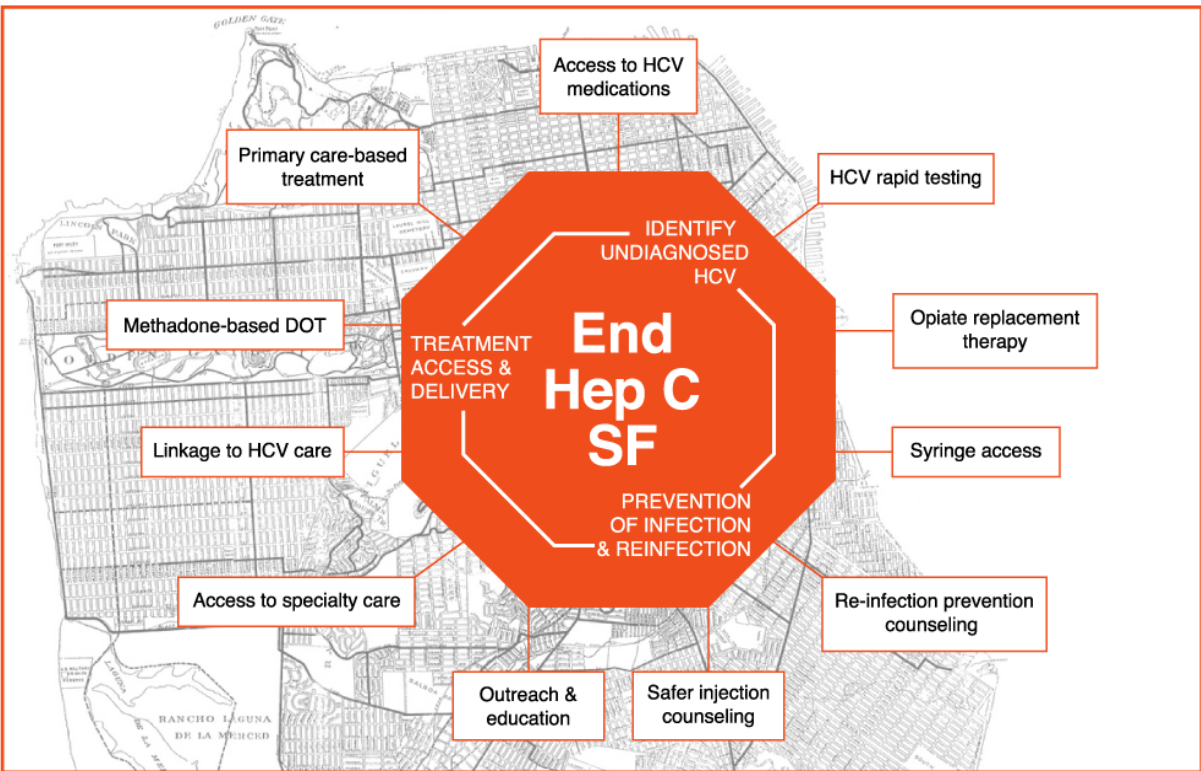


LEARNING OBJECTIVES

- Define the scope of HIV/HCV co-infection in San Francisco.
- Describe the process of microelimination plan development.
- Identify three existing resources within the health service system that were employed to support this project.

END HEP C SF

A MULTI-SECTOR COLLECTIVE IMPACT INITIATIVE



VISION STATEMENT: *End Hep C SF envisions a San Francisco where HCV is no longer a public health threat, and HCV-related health inequities have been eliminated.*

MISSION STATEMENT: *To support all San Franciscans living with and at risk for hepatitis C to maximize their health and wellness. We achieve this through prevention, education, testing, treatment, and linkage to reduce incidence, morbidity, and mortality related to hepatitis C.*





END HEP C SF

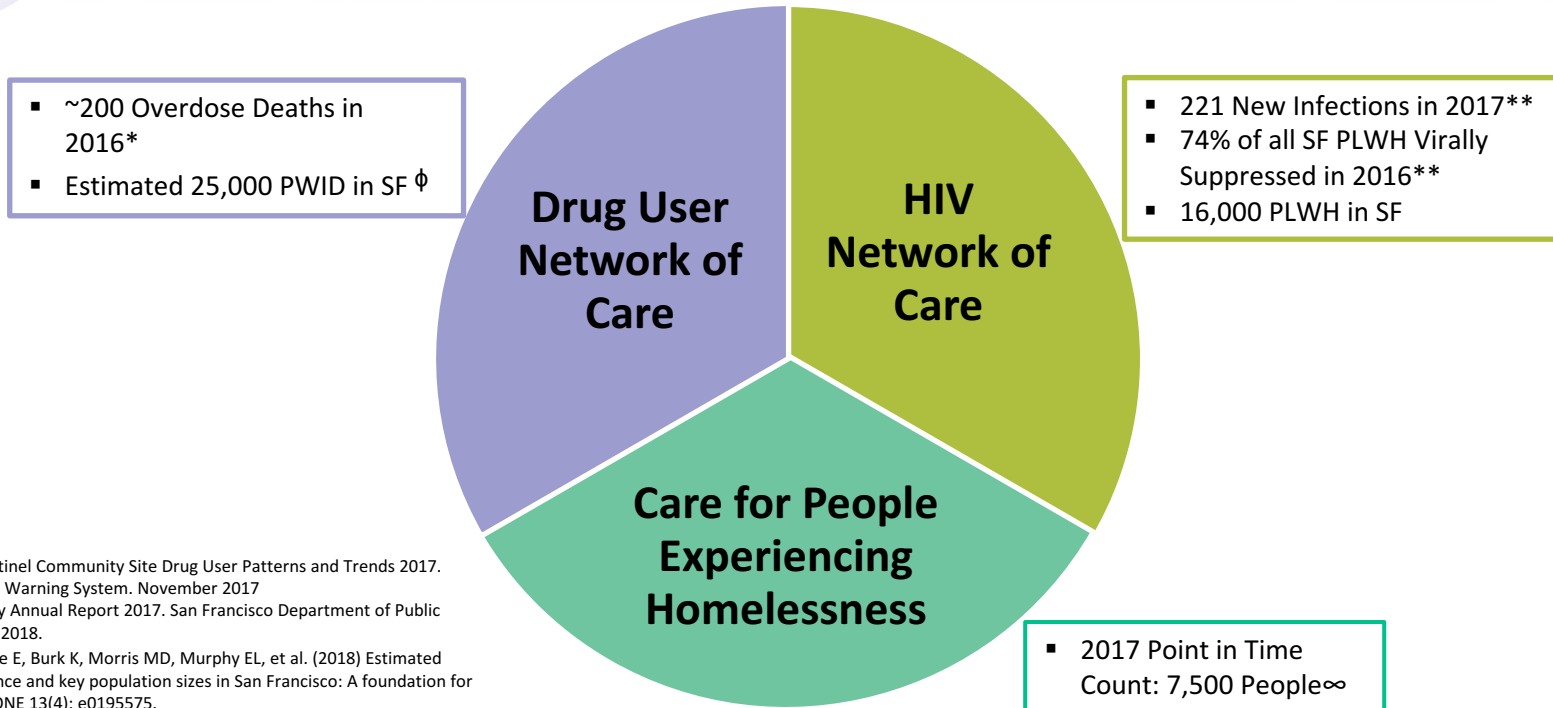
End Hep C SF has based their work on the belief that all people living with hepatitis C deserve access to the most effective treatment.

End Hep C SF is committed to working together to maximize the health and wellness of people who use drugs by treating them with respect, ensuring access to appropriate services, and empowering them to reduce harm and make choices to improve their health.

For More Information Visit
EndHepCSF.org



SAN FRANCISCO LANDSCAPE OF CARE



*San Francisco Sentinel Community Site Drug User Patterns and Trends 2017. National Drug Early Warning System. November 2017

**HIV Epidemiology Annual Report 2017. San Francisco Department of Public Health. September 2018.

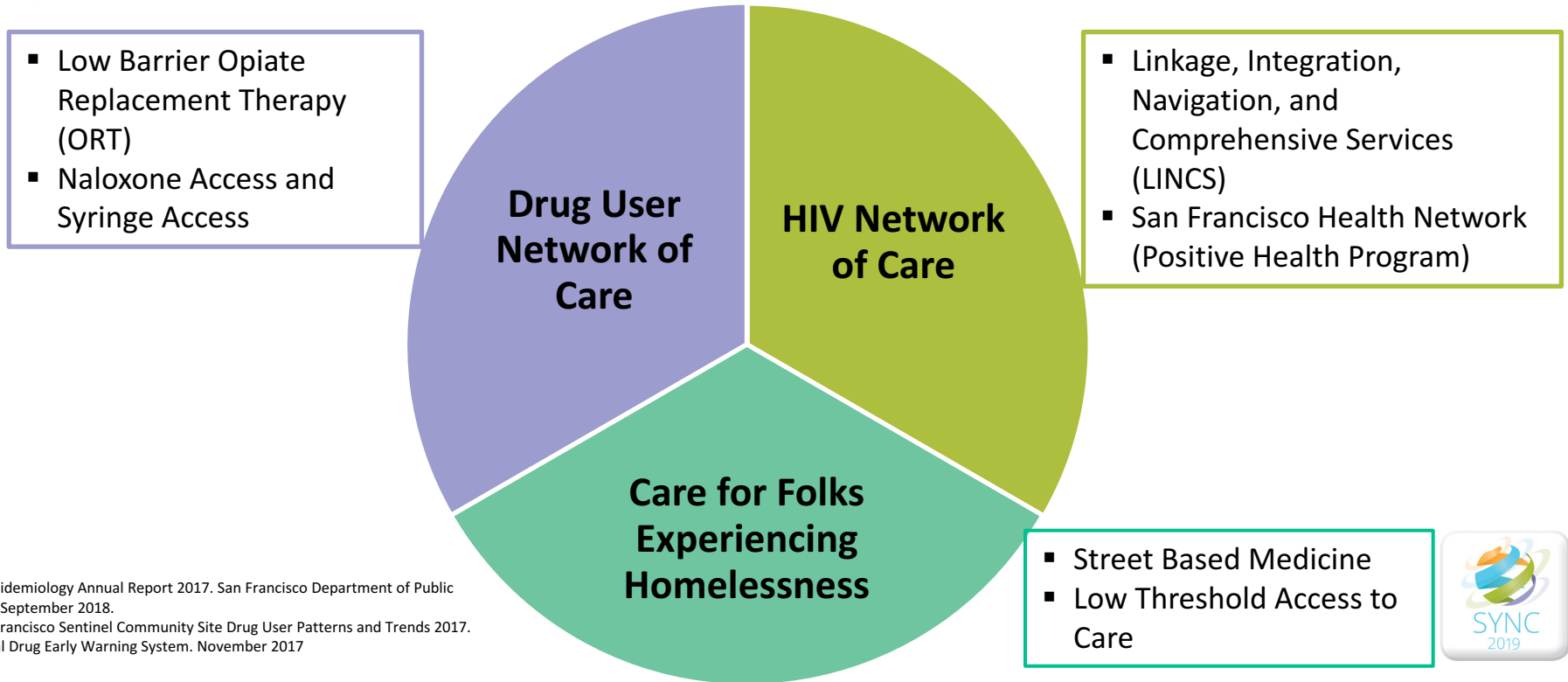
ϕ Facente SN, Grebe E, Burk K, Morris MD, Murphy EL, et al. (2018) Estimated hepatitis C prevalence and key population sizes in San Francisco: A foundation for elimination. PLOS ONE 13(4): e0195575.

<https://doi.org/10.1371/journal.pone.0195575>

∞ 2017 San Francisco Homeless Count and Survey: Comprehensive Report. San Francisco Department of Homelessness and Supportive Housing. June 2017.



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*HIV Epidemiology Annual Report 2017. San Francisco Department of Public Health. September 2018.
**San Francisco Sentinel Community Site Drug User Patterns and Trends 2017. National Drug Early Warning System. November 2017



MICROELIMINATION

- A microelimination approach entails “pursuing elimination goals in discrete populations through multi-stakeholder initiatives that tailor interventions to the needs of the populations.”*

Why microelimination?

- ❖ Less complex and costly than full elimination
- ❖ Supports momentum and teachable moments for a broader elimination strategy



MICROELIMINATION

Why HCV microelimination for People Living with HIV (PLWH)?

- Untreated HCV among PLWH increases mortality despite antiretroviral treatment.
- Direct-Acting Antivirals (DAAs) considerably reduce HCV-related mortality and morbidity.
- Positive outcomes associated with successful HCV treatment support successful HIV treatment and care goals.
- Nationally estimated that 20% of PLWH have a past or current HCV infection.
 - Current evidence, though limited, indicates that significant progress has been made with this population.
- Community Led and Supported
 - Getting to Zero and San Francisco HIV Community Planning Council





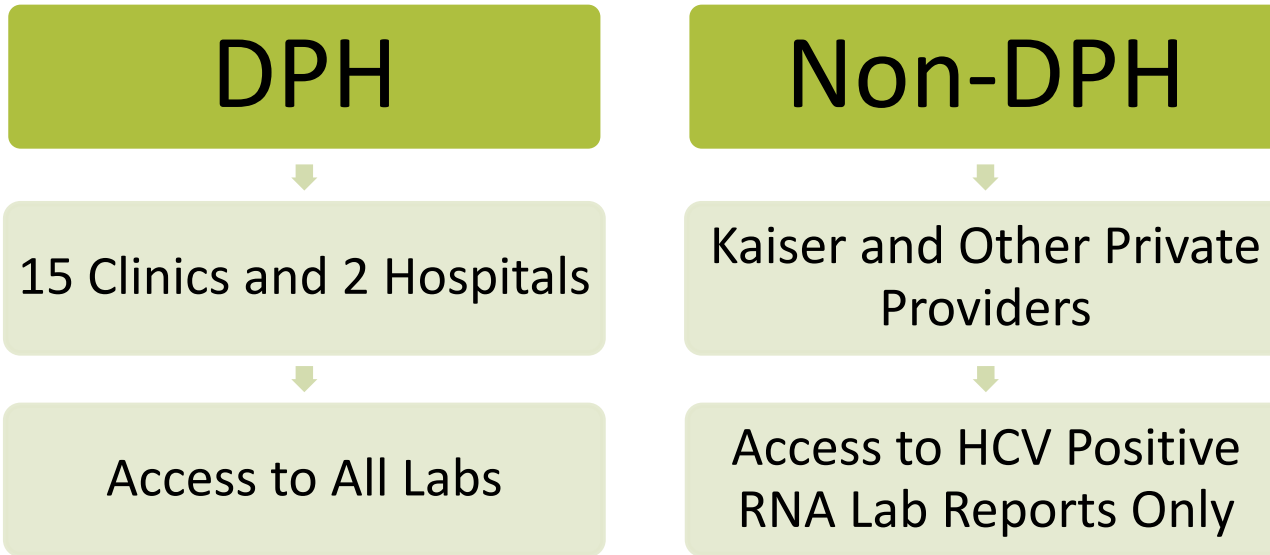
WHY MICROELIMINATION NOW?

- Low new infections of HIV.
- High proportion of folks in care.
 - Those that are not in care are also at high risk for HCV.
- CDC funding for SFDPH Project OPT-IN.
 - HIV prevention for PWID and people experiencing homelessness.
- Other jurisdictions have laid out successful models of microelimination.
 - New York
 - Philadelphia





SAN FRANCISCO LANDSCAPE OF CARE





ACCESS TO HCV TREATMENT FOR PEOPLE LIVING WITH HIV (PLWH)

16,000 PLWH in San Francisco

DPH

3,831 (24%) HIV+ Active San Francisco Health Network (SFHN) Patients

248 (36%)
Currently
Coinfected

436 (63%)
Successfully
Treated

NON-DPH

Kaiser and Other
Private Providers

Out of Care

Unknown





UNDERSTANDING THE BARRIERS TO HCV TREATMENT WITHIN DPH

Identify Coinfected SFHN Patients

- Review of San Francisco General lab reports (HIV and HCV).



Identify and Interview SFHN Providers with the Highest # of Co-infected Patients

- Ask providers about barriers faced in treating currently co-infected patients.



Assign “Codes” to Currently Co-infected Patients

- Lost to follow-up
- Medically complex
- Housing, substance use, or mental health barriers
- HIV uncontrolled
- Hospice





WARD 86 CASE STUDY

2014

- 672 Coinfected Patients
- DAA Released (All Oral Meds)
- Onsite HCV Tx @ Ward 86

2015-2018

- Medi-Cal Expanded Access to HCV Tx
- Treated >400 Patients by Dec. 2018

2019

- ~60 Coinfected Patients
- On-Site Navigation Services
- Increased Surveillance and Education





DATA CHALLENGES

- Only have anecdotal evidence that private providers have cured their HIV+ patients of HCV.
- Need HIV AND HCV surveillance data to determine who has been cured outside of the San Francisco Department of Public Health Safety-Net.

HIV Surveillance

- Active Surveillance
- Monitor labs, pathology reports, medical records
- Enhanced mortality surveillance
- Molecular HIV surveillance
- Annual epidemiology reports

HCV Surveillance

- Mandated reporting of HCV positive lab reports
- Can not determine who has been cured
- Patient information often missing



WHERE WE ARE NOW



Registry Match
Planning



Endorsements
from Getting
to Zero and
HIV
Community
Planning
Council



Early Stages of
HCV Negative
Lab Planning



Low Threshold
HCV
Treatment
Models
Initiated





NEXT STEPS FOR CITY-WIDE MICROELIMINATION

Registry Match

- HIV Surveillance Registry and HCV Surveillance Registry

Develop Programs

- Implement Practice Transformation Protocols

Increase Surveillance

- HCV RNA Negative Lab Reporting
- Enable Data to Care

Invest in Elimination

- Address gaps in Accessibility
- Invest Resources in High-Support Treatment and Care Models

Applying Lessons Learned

- Apply lessons learned through microelimination efforts towards broader HCV elimination.

THANKS TO OUR END HEP C SF PARTNERSHIPS!





THANK YOU

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For More Information Visit

EndHepCSF.org

