

FIND 



HCV SELF-TESTING

Challenges and opportunities from real world implementation

◆ Sonjelle Shilton, Hepatitis Lead FIND
November 8th
European testing week webinar on hepatitis C self-testing



SELF-TESTING IMPORTANT POINTS



- It is **not here to replace other testing modalities** from which the majority of the population learn their status
- It **is not a definitive test** but rather the first step towards learning a status. All positive results must be confirmed using the national algorithm
- **Currently research use only** HCV self-tests, not yet available on the market

EVIDENCE ON UPTAKE, LINKAGE, & COST

Pakistan

- integrating HCVST into existing house-to-house screening campaign for a micro-elimination program among general populations in a district in Karachi
- Primary objective is increase in testing uptake
 - Secondary objective is operational feasibility and cost
- Cluster randomized control design
- Estimate to enroll 2000 participants
- Using oral fluid tests

<https://www.clinicaltrials.gov/ct2/show/NCT04971538>

Georgia

- integrating HCVST onto existing online HIVST platform targeting PWID and MSM in Tbilisi and Batumi
- Primary objective is increase in testing uptake
 - Secondary measure is linkage to further care
- 5 arm randomized control design
- Estimate to enroll 1200 participants
- Using oral fluid test

<https://clinicaltrials.gov/ct2/show/NCT04961723>

Malaysia

- integrating HCVST onto existing HIVST platform used by all key populations nation wide
- Primary objective is increase in testing uptake
 - Secondary measure is linkage to further care
- Randomized control design
- Estimate to enroll 750 participants
- Using both blood and oral fluid tests

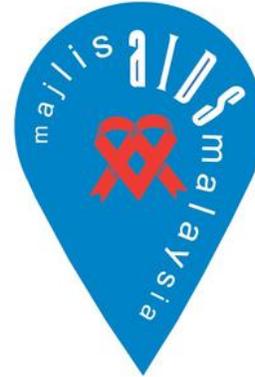
<https://clinicaltrials.gov/ct2/show/NCT04982718>

HCVST IMPACT STUDY IN MALAYSIA
ORGANIZATIONS INVOLVED



Ministry of Health Malaysia

Research team



Study implementation

Peer support with network of partner organizations



Sponsor



Web development
 Data protection



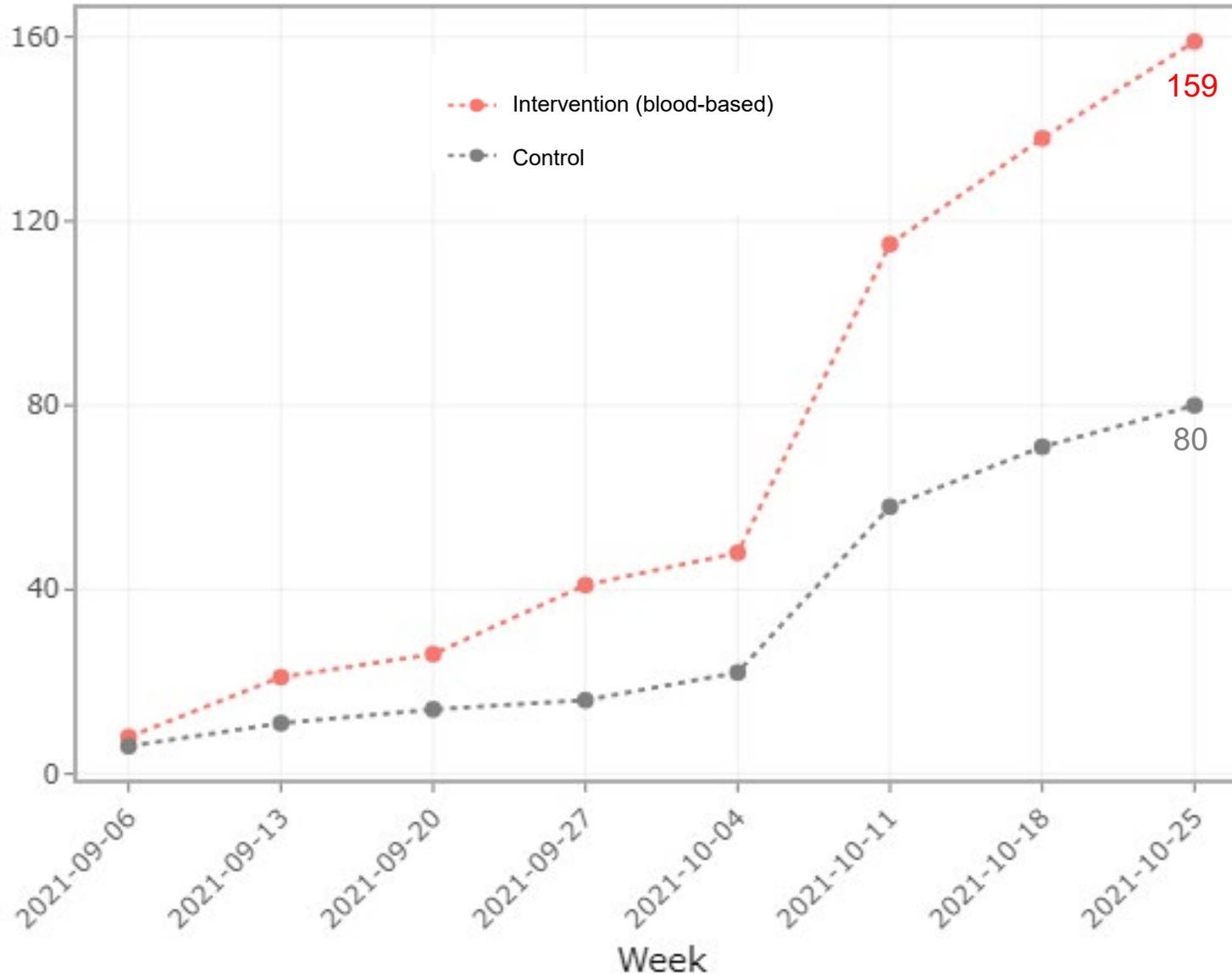
In-country supporting partner

HCVST STUDY IN MALAYSIA OVERVIEW

- Malaysia, as a upper middle-income country with a population of more than 32 million people, has an estimated HCV seroprevalence of 1.9%.
- Nationwide study
- Integration with HIVST
 - Leverage on existing momentum of JOM-Test platform
 - University of Malaya & MAC - Integrated HIV self-testing (HIVST) service delivery in Malaysia for policy and service development: JomTest online

PRELIMINARY RESULTS

RECRUITMENT PROGRESS FROM 07 SEP - 31 OCT 2021



■ Intervention group (blood-based HCVST):

- Minimum to enrol = 250 **64%**

■ Intervention group (oral fluid-based HCVST):

- Minimum to enrol = 250

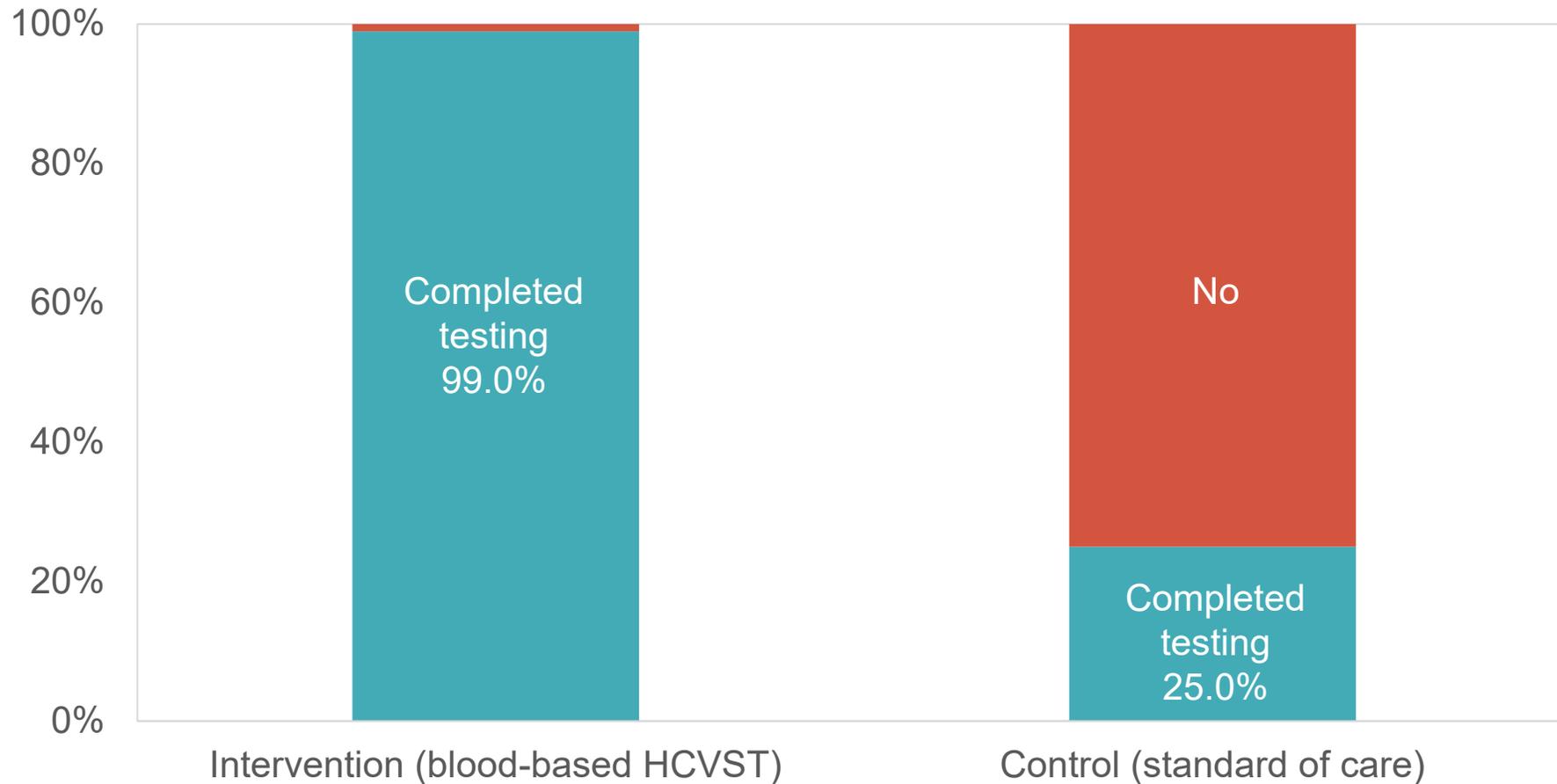
■ Control group (standard of case):

- Minimum to enrol = 250 **32%**

PRELIMINARY RESULTS

IMPACT OF HCVST ON UPTAKE OF HCV ANTIBODY TESTING

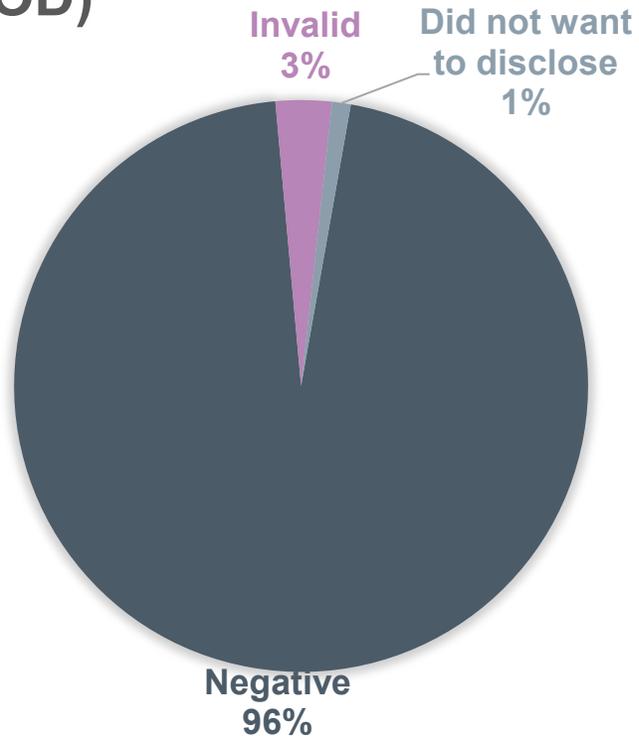
■ Based on responses from follow-up surveys #1 & #2 (96 intervention, 28 control): $p < 0.01$



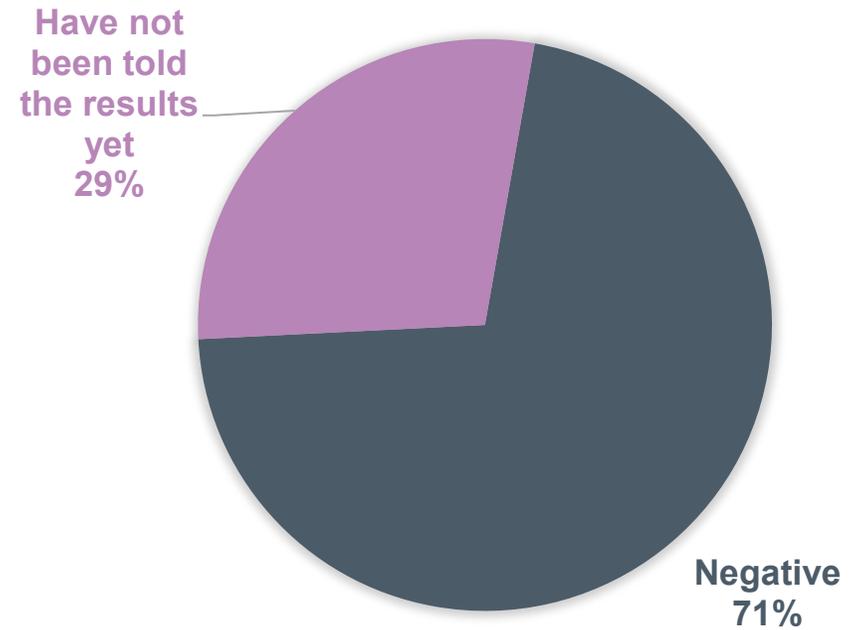
PRELIMINARY RESULTS

HCVST AND STANDARD OF CARE TESTING RESULTS

**INTERVENTION
(BLOOD)**



**CONTROL
(STANDARD OF CARE)**

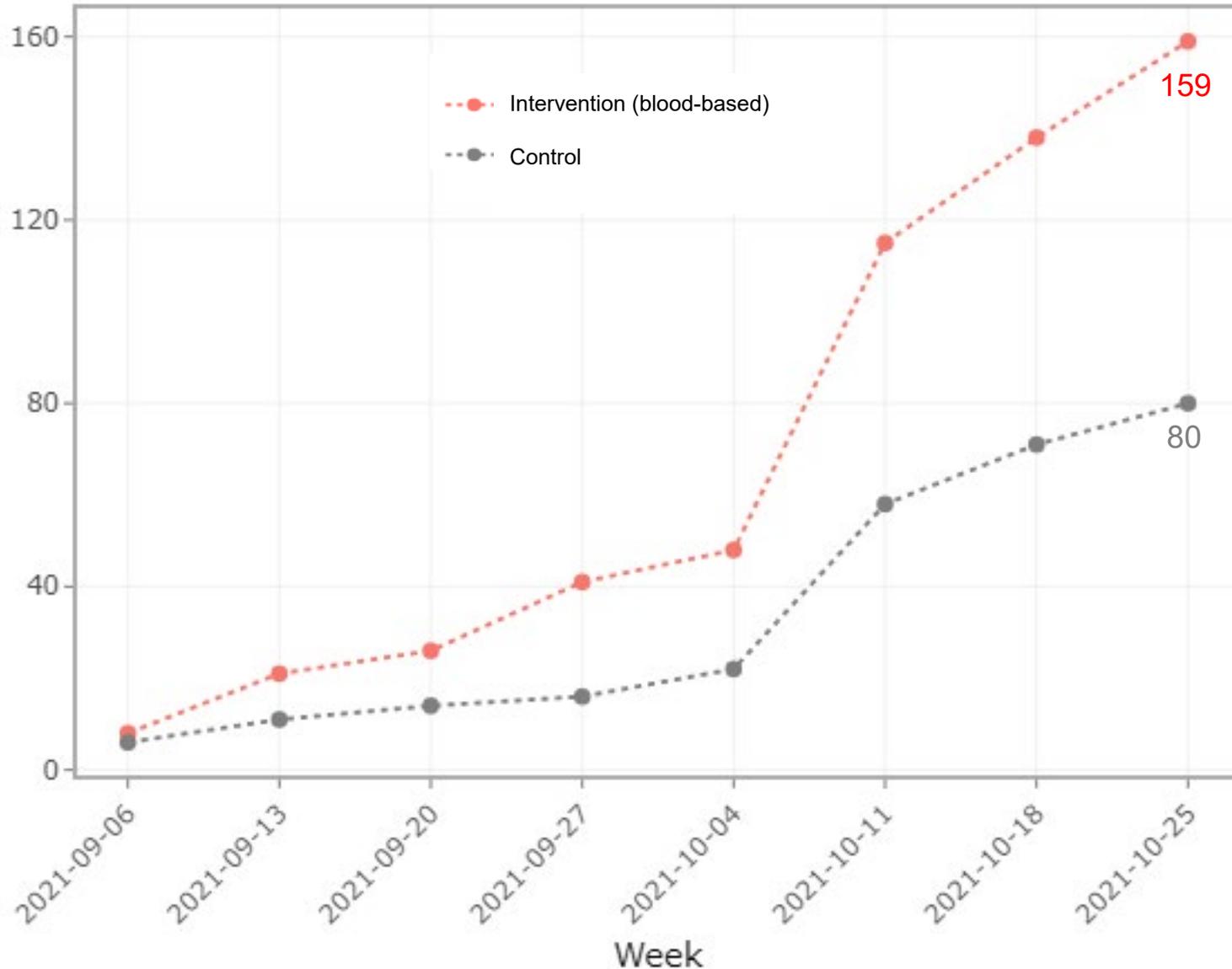


Strong collaboration; MoH and CBOs

Awareness generation

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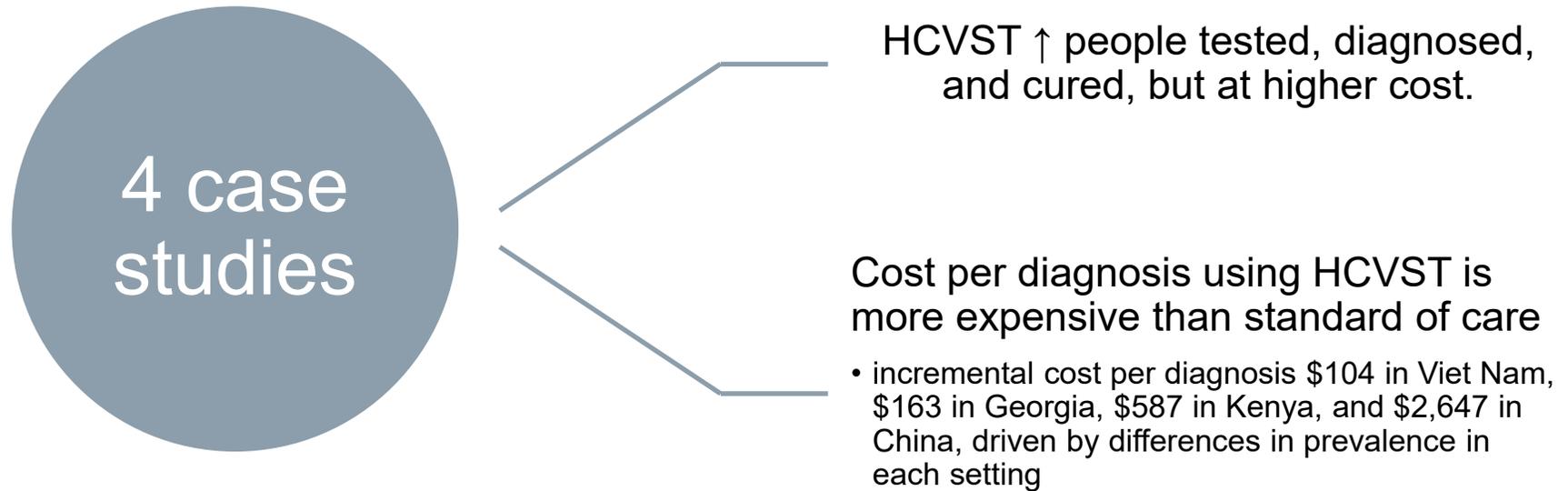
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Strong collaboration; MoH and CBOs

Awareness generation

Cost and cost effectiveness

COST EFFECTIVENESS RESULTS



Summary: Cost per HCV diagnosis and cure is higher using self-testing, but more people are diagnosed. HCVST is likely to be more cost-effective in high-prevalence settings.

THANK YOU!

Acknowledgements:

Participants in the study

MAC: Anu Karunanithy

Ministry of Health Malaysia: Dato' Dr Muhammad Radzi Abu Hassan,
Dr Nazrila Hairizan Bt Nasir, Dr Huan-Keat Chan

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University of Bristol (Dr Josephine Walker)