

Micro-Elimination of Hepatitis C Virus (HCV) in Underserved Areas in the Islamabad Capital Territory (ICT) and Tuberculosis Verbal Screening

PROJECT BACKGROUND

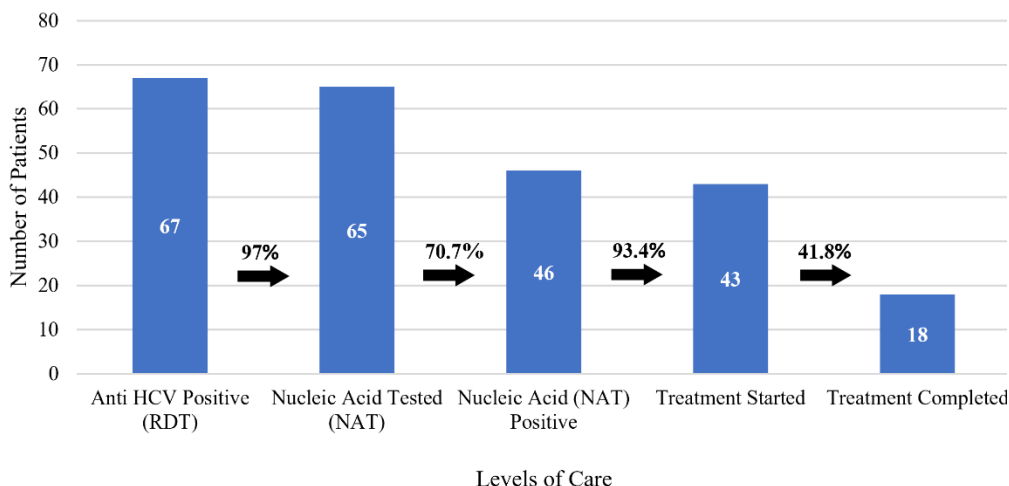
- In 2018, Integral Global Consulting (IGC) received funding from the John C. Martin (JCM) Foundation to pilot an HCV micro-elimination project which aims to conduct point-of-care testing and treatment in 5 underserved areas (referred to as “slums” in Pakistan) of Islamabad covering a total population of 50,000.
- The program is implemented for 3 years (2018–2021) with support from the Ministry of National Health Services, Regulations, and Coordination (Ministry of NHSRC) and technical assistance from the U.S. Centers for Disease Control and Prevention (CDC)’s Division of Viral Hepatitis (DVH).
- As part of this project, individuals are also being verbally screened for tuberculosis (TB) and suspected cases will be referred to a public sector TB clinic for testing.
- Patient data will be collected via a cloud-based system and will allow the Ministry of NHSRC to program more directed interventions.
- An HCV treatment center has been established in the Federal Government Civil Surgeon Dispensary of Islamabad, where all the anti HCV+ individuals are referred for confirmatory testing and treatment of HCV.

CURRENT UPDATES

- Currently, a total of 2,288 individuals have been tested for HCV. Individuals were identified utilizing a screening questionnaire which measured HCV risk, and served as the inclusion criteria for this program.
- In Islamabad, individuals from one *slum*, the “France Colony,” have been screened for HCV (N=1,860), and screening is underway in a second *slum*, “100 Quarters,” (N=428).
- HBV vaccinations are provided to those who receive HCV treatment, and have been administered to 43 patients.
- Community health workers (CHW) monitor the treatment, compliance, and follow-up with patients. There are currently 5 patients (out of 2,288) lost to follow-up and CHWs are working to re-engage them.
- CHWs visit *slums* on a daily basis and go door to door looking for potential high-risk individuals to conduct RDT.
- If positive, patients are referred to the clinic for confirmatory HCV RNA or NAT testing with follow-up from CHWs.
- If HCV RNA or NAT is positive, patients are administered a 12-week course of SOF–DAC with CHWs ensuring adherence to medication.
- At the end of the 12 weeks, a patient’s sustained virologic response (SVR) is tested to ensure viral clearance.

PROJECT COMPONENTS

**Care Cascade of HCV Micro-Elimination Pilot Project,
Islamabad, March 2019 to June 2019**



*Note: Total number of individuals tested for HCV is N=2,288.
There are 25 patients currently on treatment.*

- **Awareness** – Enhancing awareness of HCV and HBV with emphasis on HBV vaccination in all age groups, including birth dose, in Islamabad. Additionally, there is a focus on injection safety, safe blood transfusions, and standardized infection control practices at healthcare facilities.
- **Testing** – Providing screening (rapid test) and testing (confirmation using NAT testing) at designated clinical sites.
- **Treatment** – Same-day confirmation and treatment regimen, ultimately leading to minimum dropouts and cure of >95% cases.
- **Follow up** – Tracking of patients through CHWs and data collection on a cloud-based system.
- **Data** – Standardized data collection, data entry, and analysis to capture cascade of care. Enhanced data for decision-making.

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PHOTOS



Pakistan Country Lead, Dr. Huma Qureshi, meeting with the Pakistani Minister of Health to discuss the hepatitis program and future expansion to additional slums.



US-CDC and IGC visiting the France Colony to assess the progress of the hepatitis micro-elimination program.



IGC and CDC checking the enumeration of the homes of patients who have received HCV rapid diagnostic testing.

GOVERNMENT PARTNERSHIP

- The Ministry of NHSRC has formed a Steering Committee to oversee the program and address the emerging issues in a timely and efficient manner.
- In addition to the HCV screening, verbal screening of TB is being done in the field and the TB suspected cases will be referred to the designated public sector TB clinic for further testing, treatment, and follow up.
- The Ministry of NHSRC has donated clinic space where patients from this project receive hepatitis care.
- The Ministry of NHSRC plans to expand this program to all underserved communities of Islamabad along with integration of additional infectious and non-infectious diseases, such as Diabetes and Hypertension.

NEXT STEPS

- Routine review of data and reporting to the Ministry of NHSRC.
- Continued engagement with the US-CDC for technical assistance, analysis of data, and recommendations.
- Develop M&E indicators and continued program improvement as IGC expands to additional *slums*.
- Develop monthly cascade of care reporting using real time data and analysis.
- Routine monthly meetings with CDC to obtain technical guidance on the project.
- Ministry of NHSRC engagement to get obtain feedback and incorporate measures in a timely manner.

COLLABORATING PARTNERS

- Integral Global Consulting (IGC)
- John C. Martin Foundation (JCM)
- Pakistan Ministry of National Health Services, Regulation and Coordination
- The Health Foundation (THF)
- U.S. Centers for Disease Control and Prevention (CDC)
- University of Maryland



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