Individual and structural factors associated with recent HCV testing in people who inject drugs: gender-based analyses of the COSINUS Cohort

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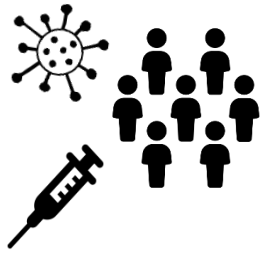
I have no conflict of interest to declare

In France

- High HCV antibody (64%) and RNA prevalence (48%)
  Weill-Barillet 2016; Grebely 2019



- Individual and structural barriers to HCV testing and care access (unstable housing, stigmatization, etc.)
- Women: more vulnerabilities and less access

- HCV testing still insufficient *Cadet-Thaïrou 2020*

Only half of the seronegative and cured PWUD recently tested

→ **Testing** is **an important step** in the care cascade in terms of HCV elimination
WHO 2016

Objective: to identify **factors** associated with **recent HCV testing** in **PWID** according to **gender**, using data from the COSINUS cohort

COSINUS cohort (2016-2019)

Main objective: to assess the impact of drug consumption rooms on PWID health

- Injecting either illegal drugs or prescribed medication in the previous month
- 18 years old or over, French speaking, provided consent to participate

Secondary Analyses

- Selection of participants eligible for HCV testing
- Mainly recruited in harm reduction services
- In two French cities (Marseille and Bordeaux)
- Questionnaires at enrolment (M0), 6-months (M6) and 12-months (M12)

n= 298 participants equating to **624 observations**

- Main outcome

Recent HCV testing (≤ 6 months) *versus* no recent testing

- Explanatory variables

Socio-demographics, drug use practices, health conditions, access to care & prevention, prison experience

- Analyses

Multivariable mixed logistic regressions stratified by gender

Backward stepwise procedure

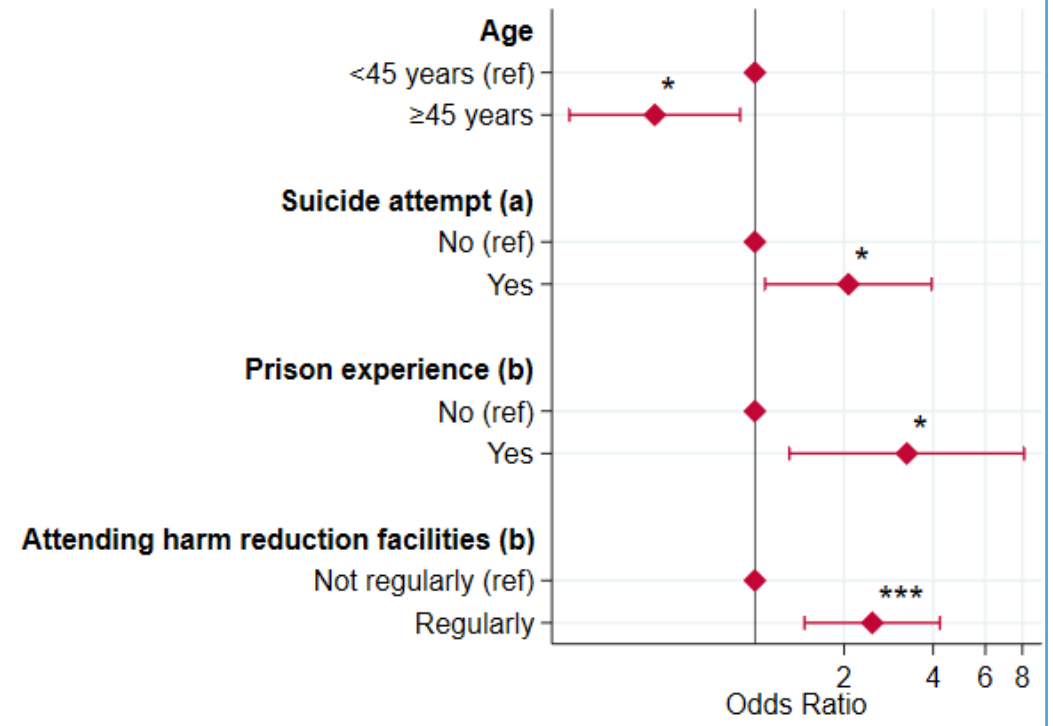
Research conducted under the responsibility of INSERM / CEEI ethics committee approval IRB00003888 of the 11th September 2014 - CNIL authorization of the 6th of May 2015

Figure 1: Factors associated with recent HCV testing

(multivariable mixed logistic regressions; $n_{observations} = 624$)

Men

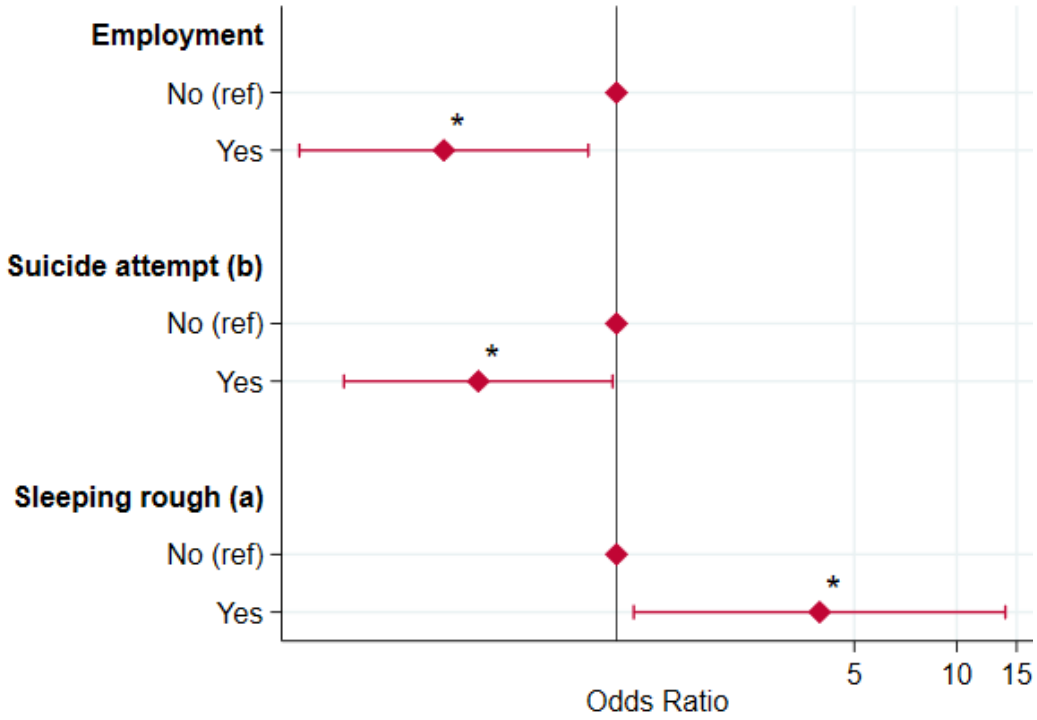
❖ Recent HCV testing n= 294 (60%)



Note. (a) during lifetime ; (b) during the previous 6 months ; * p < 0.05 ; *** p < .001

Women

❖ Recent HCV testing n= 94 (69%)



Note. (a) during the previous month ; (b) during lifetime ; * p < 0.05

For men

- **HCV testing barriers**:
  - Older men may have had fewer at-risk practices or services could be less adapted

- **HCV testing facilitators**:
  - Suicide attempts: more frequent attendance of healthcare facilities offering HCV testing *Gibbs 2021*
  - Harm reduction services (even in prison): facilitated access to HCV testing *Gibbs 2021*

For women

- **HCV testing barriers**:
  - Employment: those employed did not attend harm reduction services because of stigma *Meyers 2021*
  - Suicide attempts : women may hide their drug use to avoid stigma so less access to testing

- **HCV testing facilitators**:
  - Contact with outreach services for unhoused women *Broad 2020*

Conclusions

- Different HCV testing factors for men and women who inject drugs
- Adapting services and improving HCV testing for older men
- Adapting current harm reduction services for women's needs

Our thanks to all the participants in COSINUS, and to those involved in the cohort's design, data collection, and data analyses.

Thank you for your attention

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Illustrations from: *https://thenounproject.com/*