



# HEAD\* Start Georgia; projects overview

\* Hepatitis C Elimination through Access to Diagnostics

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## HEAD-Start projects overview

FIND began discussions with NCDC regarding support to HCV program in 2016.

From that time joint projects include:

### Completed

- FIND clinical evaluation on Xpert® Fingerstick HCV cartridge in cooperation with Lugar center and Hepa+
- 310 persons provided with confirmatory testing

### Ongoing

- HEAD Start decentralization of HCV diagnostics study
- HCV Rapid Diagnostic Test (RDT) evaluation

### In preparation

- HCV core antigen as test of cure study
- HCV DBS validation study
- HCV Genedrive study of use in intended settings
- Catalyzing scale up of decentralization of diagnosis



## HEAD Start decentralization of diagnostics study



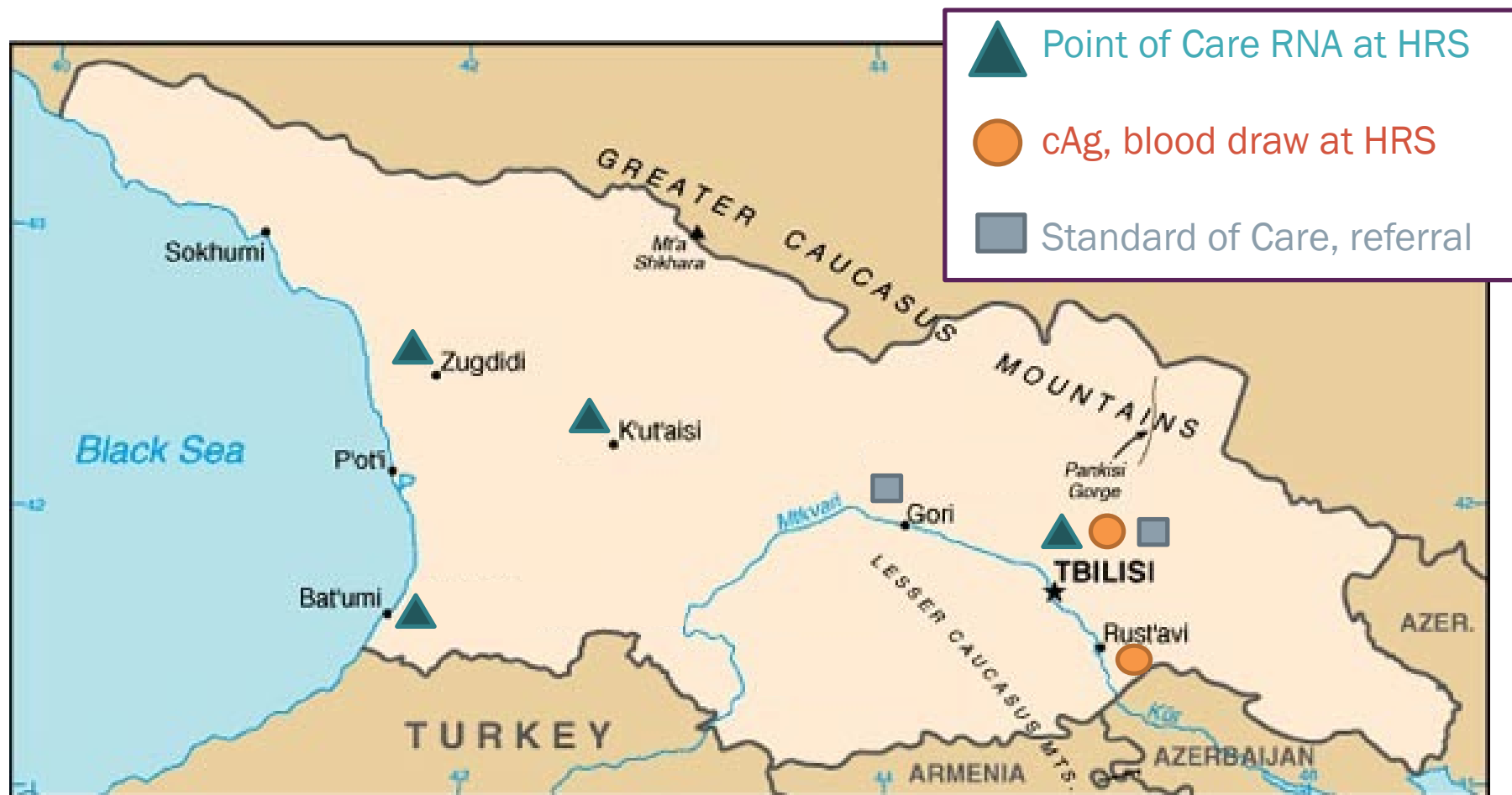
# HEAD-Start decentralization of diagnostics study in Georgia

## Objective:

To determine whether the proportion of participants who receive results of HCV viremia testing differs between Harm Reduction Site (HRS) based testing (either decentralized HCV RNA testing, or blood draw at HRS for centralized HCV cAg testing) and referral-based testing [standard of care (SOC)] among PWID who test anti-HCV-positive at HRS.

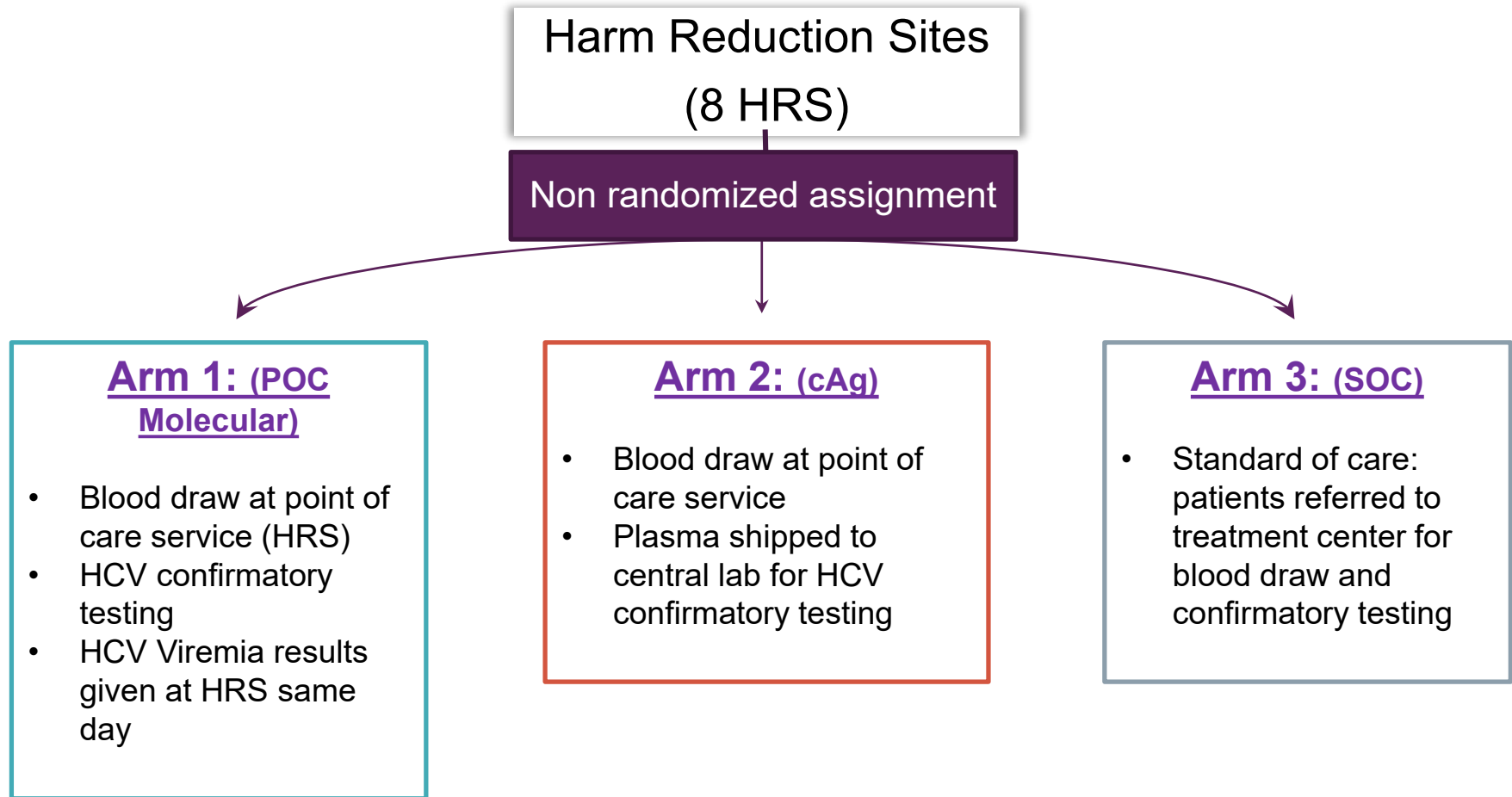


# HRS sites included in study





# Study design





## Study sample size

Total to be  
enrolled: 1860  
HCV RDT+

FIND is covering the  
costs for all associated  
diagnostic tests and  
doctors visits during  
treatment of the enrolled  
participants



# Study timeline

Initial  
Georgian IRB  
approval June  
2017 - HRU,  
Sep 2017 -  
NCDC

Unitaid  
Human  
Subjects  
Research  
Approval  
April 2018

Patient  
enrollment  
starts May  
2018

Expected  
enrollment  
completed  
Arm 1 - Dec  
2018  
Arm2&3 -  
Feb 2019

Expected  
site close  
out Q3  
2019

Arm 2  
and 3  
study  
training  
Feb  
2018

Arm 1  
study  
training  
April  
2018

Reached  
50%  
enrollment  
beginning of  
Nov 2018

Expected 6  
month  
chart  
review  
completed  
Aug 2019





## Preliminary Data: May 2018 – November 2018



# Screening and enrollment

Excluded: n=53 (5 %)

- Tested HCV RNA positive from 2015
- Participant never used illegal drugs
- Participant not willing to come back after to HRS 6 months after enrolment

Screened For  
Study Eligibility

N=984

Eligible

n=932 (95%)

Arm 1

N=519 (56%)

Arm 2

N=195 (21%)

Arm 3

N=218 (23%)



## Patient Demographics and preliminary results

932 eligible and consenting participants enrolled to the study

- Gender: Male 890 (95.5%),  
Female 42 (4.5%)
- Age: Median 43 years,  
Range: 23 – 88
- Currently injecting drugs: 739 (79%)



# Proportion of participants receiving HCV confirmatory test by arms

The proportion of study participants who have completed HCV viremia test as of November 1 2018, by arm

768 – completed HCV confirmatory test		
Arm 1	Arm 2	Arm 3
518 (99.8%)	131 (67%)	119 (55%)

638 (83%) – Positive HCV Confirmatory results  
130 (17%) – Negative results



# Path to HCV Confirmatory Testing

984 were evaluated for study eligibility

932

Enrollment of PWIDs

710

Blood drawn for HCV confirmatory test at HRSs

768

Confirmatory tests done

758

Participants who received their results

372

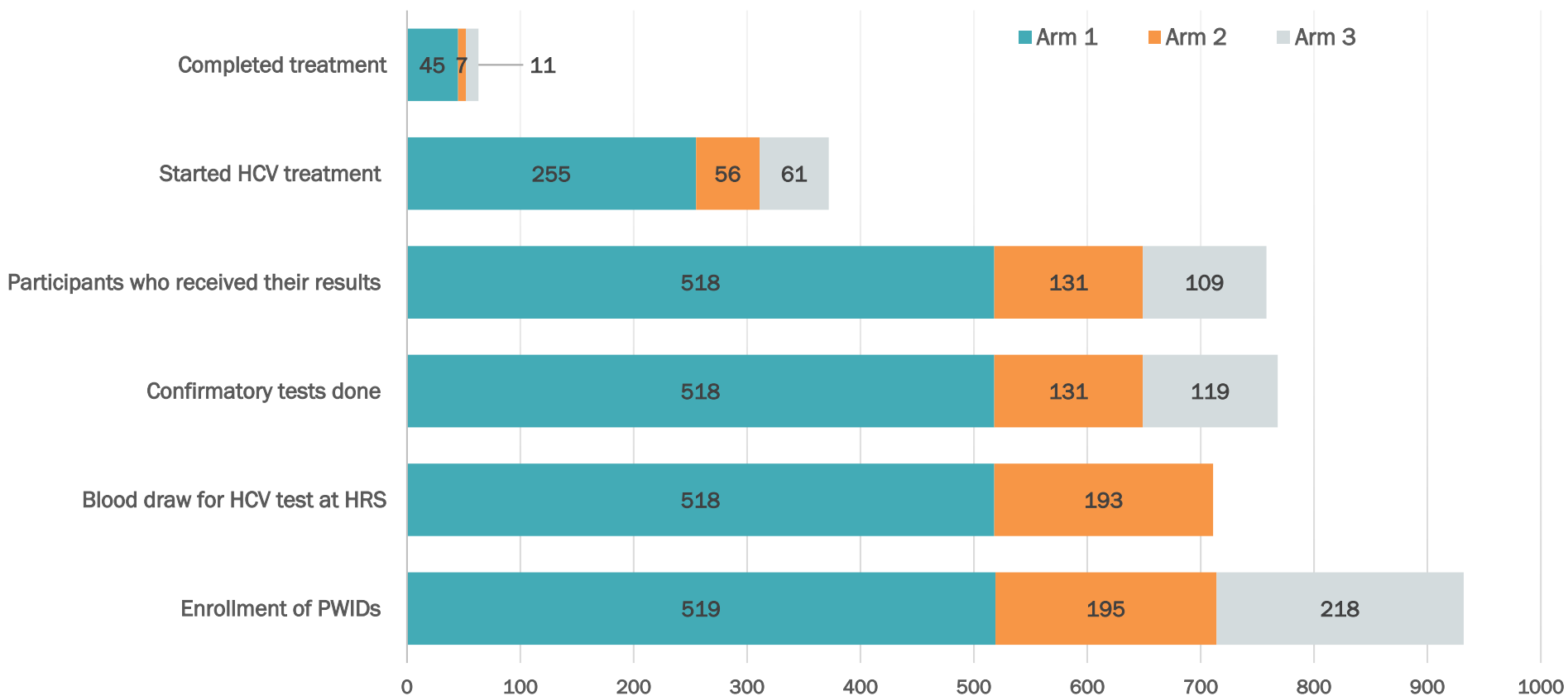
Started HCV treatment

63

Completed treatment

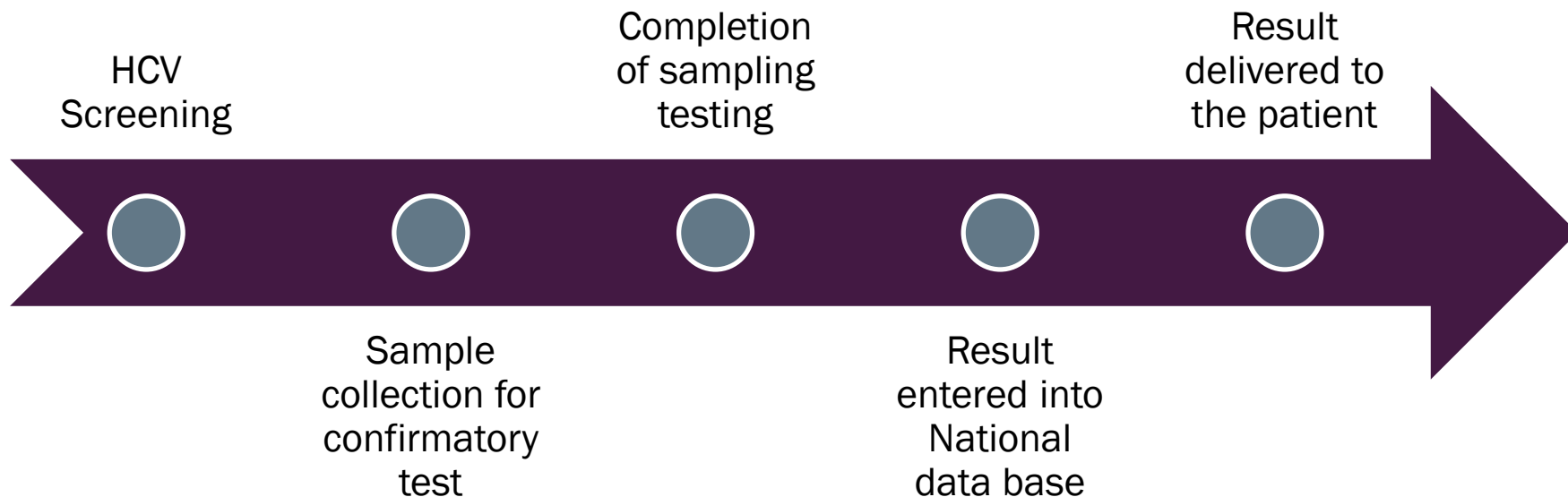


# Care cascade





## Turn Around Time of results





## Turn Around Time by arms

Time between Arm	HCV screening and sample collection for confirmation test
Arm 1	Same day
Arm 2	Same day
Arm 3	2.2 days





## Preliminary Conclusions\*

- Providing POC confirmatory viremia testing at HRS where PWIDs attend for care/needle provision improves access to HCV confirmatory viremia testing;
- On location based approaches to blood sample collection resulted in a larger proportion of participants receiving their confirmatory test results;
- The turnaround time was shortest where POC service was performed.

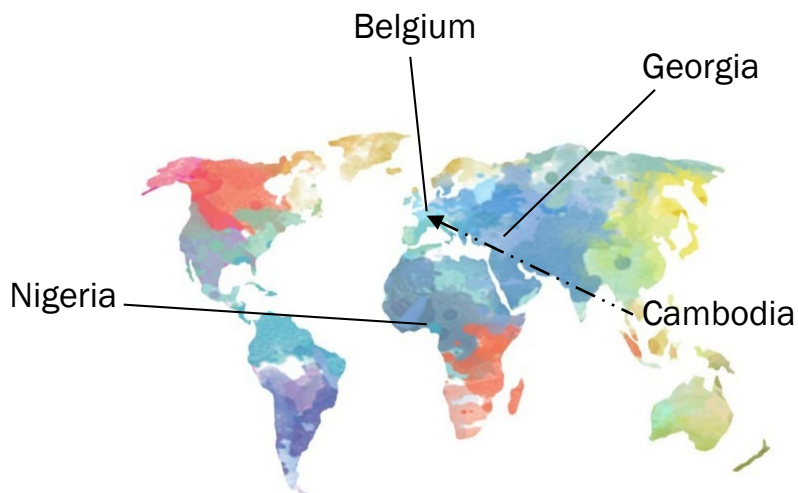
\* Please note the feasibility/acceptability/costing data is not yet compiled and will be forthcoming



## Other FIND projects in Georgia



# HCV Rapid Diagnostic Test Study



## International multicenter evaluation study

### What

- Comparison of 10 Rapid Diagnostic Tests for the detection of HCV
- In total 1'800 archived EDTA plasma samples are analyzed on two lots of each test

### Where

- Georgia: NCDC Lugar Centre;
- Nigeria: Nigerian Institute of Medical Research
- Belgium: Institute of Tropical Medicine -> samples from Cambodia

### Why

- To assess diagnostic sensitivity and specificity in HCV-mono and HCV/HIV co-infected samples
- To assess operational characteristics of the tests (e.g. lot and reader variability)

### Study timeline

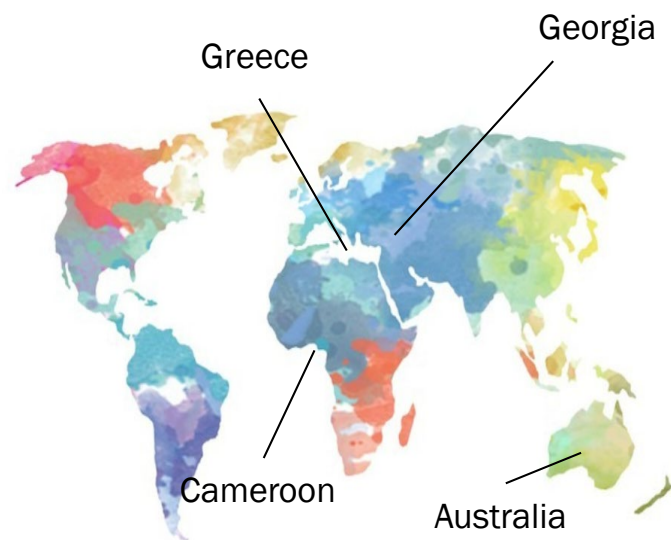
- October – December 2018

➤ *Georgia alone is running 7'600 RDTs in two months!*



# HCV Dried Blood Spot (DBS) validation study

Prospective cross-sectional multicentre diagnostic accuracy study



## What

- Validation of 3 DBS protocols for detection of HCV RNA in a high throughput platform
- In total 400 HCV RNA+ and 415 HCV RNA- will be recruited across all sites

## Where

- Georgia: NCDC Lugar Centre
- Greece: Institute of Tropical Medicine
- Australia: NRL
- Cameroon: Centure Pasture Cameroon

## Why

- To evaluate the performance of centralized HCV viral load (VL) assays from DBS
- A validated manufacturer protocol for DBS could facilitate greater use of sample transport for HCV testing

## Study Timeline

- Second half of Jan 2019 – May 2019





# HCV core antigen as test of cure study

## **What:**

To estimate the diagnostic accuracy of HCVcAg assay in differentiating patients who have achieved sustained virological response (SVR) from those who fail SVR among those who have completed treatment for hepatitis

## **Study design:**

A retrospective study on frozen samples of 131 relapsers which were HCV RNA positives at SVR12 between 2015 to 2016 in Neolab clinic. 62 SVR12 with HCV RNA non-detected

**Where:** Testing conducted at Lugar Center

## **Why:**

- Potential to use of HCVcAg for test of cure or to assess re-infection for population at risk of infection

## **Study timeline:**

- Last week of January 2019 - May 2019



# HCV Genedrive study of use in intended settings

## What:

Prospective diagnostic accuracy study

Lugar center and Hepa Plus

## Study population:

- Individuals at high risk of HCV infection recruited at HRS Hepa Plus (Tbilisi)
- Sample size: 75 detectable HCV positive and 50 non-detectable HCV participants

## Why:

- Study contribution to WHO PQ dossier and bring more molecular POC to market
- Would bring another molecular POC in Georgia for decentralised, low throughput HCV testing

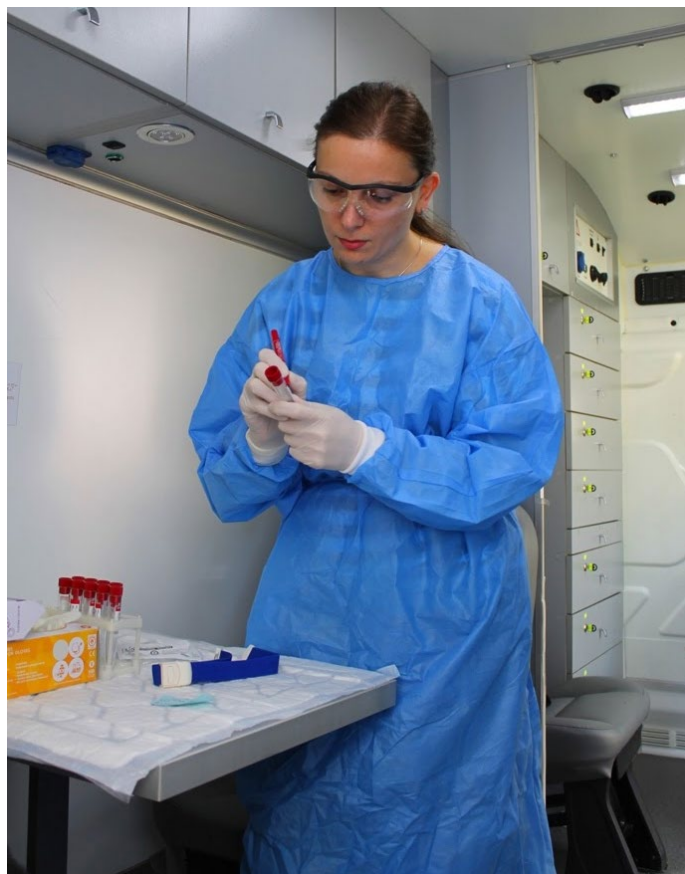
## Study timeline:

- December 2018 to March 2019





# Thank you!



Special thanks to our partners in this endeavor!



We are grateful for the input and feedback of many of the organizations also doing great work in the area of HCV elimination in Georgia

