

Access to testing and treatment in prisons crucial to hep C elimination, study finds

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(SYDNEY, Friday 7 May 2021) A world-first Australian study has shown that broad access to hepatitis C testing and treatment in prisons halves the number of new infections in that setting.

The study, led by the Kirby Institute at UNSW Sydney, took place over five years, and was published today in *The Lancet Gastroenterology and Hepatology*. It involved testing over 3600 incarcerated people for hepatitis C, and offering treatment in the case of a positive result. Hepatitis C is curable with direct-acting antiviral (DAA) therapy, which has been available in Australia through the Pharmaceutical Benefits Scheme since 2016.

“Australia is a world-leader in hepatitis C elimination, and we are on track to meet the World Health Organization’s elimination goal by 2030, thanks to accessible and affordable, curative DAA treatment, and well-targeted access to testing and clinical care,” says Professor Gregory Dore from the Kirby Institute, who is co-Chief Investigator on the study.

“We know there are high rates of hepatitis C transmission in prisons, so it is vital that strategies are in place to test and treat incarcerated people. Our study has shown that by improving access to testing and treatment, hepatitis C transmissions are significantly reduced. This ultimately means lower rates of hepatitis C in our prisons, and by extension in the wider community. As encouraging as the findings are, we believe expansion of harm reduction in the prison setting would provide even greater prevention impact.”

The study tested the efficacy of a strategy known as ‘treatment-as-prevention’, which is the principle that by implementing broad testing and treatment of an infection, transmission pathways are interrupted, resulting in fewer infections. While there is already a body of evidence showing that treatment-as-prevention works for HIV, as well as people with both HIV and hepatitis C, this study is the first to test treatment-as-prevention for those living with or at risk of hepatitis C infection in prisons, and the largest to take place in any setting.

“The model we deployed in this study was shown to be highly successful in reducing hepatitis C transmission in prisons, and it’s a model that can be replicated in prisons across Australia and the world,” says Professor Andrew Lloyd also from the Kirby Institute, and co-Chief Investigator on the study.

“Using this evidence base, we have developed a toolkit for how to implement hepatitis C testing and treatment at scale in prisons with the aim of dramatically reducing or eliminating hepatitis C transmission using this treatment-as-prevention strategy.”

The [Implementation Toolkit](#) is designed for health service and corrections administrators, ensuring the swift implementation of the research findings into practical strategies to optimise health and eliminate disease.

The researchers say that, through a comprehensive public health approach across all sectors of the community, elimination of hepatitis C by 2030 is achievable. “Expanding access to hepatitis C testing and treatment within prison settings is key to achieving elimination both within the prison and the wider community. The evidence gained from this study makes the strong case, and provides a blueprint, for delivering these important health services in prisons across the world,” says Professor Lloyd. “From both a public health and human rights perspective, it is vitally important that incarcerated people have access to curative hepatitis C treatment and care.”

The [Surveillance and Treatment of Prisoners with hepatitis C \(SToP-C\)](#) study was funded by the National Health and Medical Research Council and Gilead Sciences.

The SToP-C Implementation Toolkit is accessible at <https://stopc.org/>. The toolkit is for health and corrections administrators and sets out a best-practice model to implement hepatitis C testing and treatment in prisons.

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Stakeholder quotes

Steven Drew, Chief Executive Officer of Hepatitis NSW, a key project partner, says, “Critical to the achievement of hep C elimination goals is the identification of practical and effective initiatives that interrupt transmission. SToP-C is the embodiment of a focussed, population-based, public health program that ticks the boxes in this regard. The evidence clearly supports scale up of these sorts of programs.

“The development of a practical toolkit to guide broader implementation by applying documented research and learnings, informed by the people on the frontline, provides the means for greater take up. The program can be tailored to reflect and accommodate the setting and resource circumstances, as well as environmental, organisational and operational requirements.”

Gary Forrest, Chief Executive of Justice Health and Forensic Mental Health Network, appreciates the importance of treating hepatitis C in prison settings: “NSW correctional settings have a higher prevalence of hepatitis C than in the community. By identifying a patient earlier and offering them treatment options we can prevent further transmission which is essential to meeting our ambition of hepatitis C elimination by 2030. It is encouraging to see the results of this study and we look forward to implementing evidenced-based treatment options for patients with the virus.”

Luke Grant, Deputy Commissioner at Corrective Services NSW, says “Corrective Services NSW is committed to ensuring incarcerated people in NSW have access to important health services. Prisons provide a unique opportunity to engage people in health treatment who might not otherwise have the same level of access or incentive to seek treatment. These results provide critical insight and strong evidence to support hepatitis C testing and treatment in our prisons to address this important health challenge.”