

# S | T | O | P | C

- Surveillance and Treatment of Prisoners with Hepatitis C (SToP-C)
- A partnership project to investigate the feasibility of hep C treatment as prevention in the prison setting

## STUDY UPDATE – TREATMENT PHASE OPEN!

Welcome to SToP-C Study Update Newsletter. In May 2017 SToP-C opened the Treatment Phase of the study at Goulburn Correctional Centre. The other participating centres – Lithgow, Dillwynia (womens) and the Outer Metropolitan Multipurpose Correctional Centre – had commenced treating patients by August.

To 31 October, 120 patients have commenced the study's hepatitis C ('hep C') treatment. 39 patients have completed their 12 week course of therapy with all showing response to therapy. The first patients will reach their 12-week post-treatment visit (SVR12) by December, at which time sustained hep C virus suppression will indicate a complete cure.

The SToP-C study is anticipated to reach completion in 2019. It aims to treat all prisoners at the four centres so that hep C is eliminated and transmission of the virus halted. All SToP-C participants with hep C infection receive the newly available treatment named Epclusa.

The hep C Surveillance Phase of the study continues. This involves 6-monthly testing for all prisoners at the participating sites, as well as HIV and hep B testing on enrolment.

### SPOTLIGHT ON: EPCLUSA



Generic name: sofosbuvir/velpatasvir  
Manufacturer: Gilead Sciences Inc

- 2 medications combined in 1 pill
- 1 pill daily for 12 weeks
- 95%+ cure for all hep C genotypes
- Minimal side effects
- Offered to all SToP-C participants with chronic hep C
- Available outside the study through the Pharmaceutical Benefits Scheme from 1 August
- Currently considered the gold standard treatment for hep C

Regular testing allows detection of new infections and re-infections before, during and after treatment scale-up. To 31 October, 1856 prisoners have enrolled for testing. 32 incident cases have been detected through repeat testing. The impact of treatment scale-up on hep C incidence is the primary outcome measure of the study.

## THIS ISSUE:

Study update

SToP-C aims

Implementation Toolkit

Qualitative research

2018 Stakeholder Workshop

Current status

Project Partners

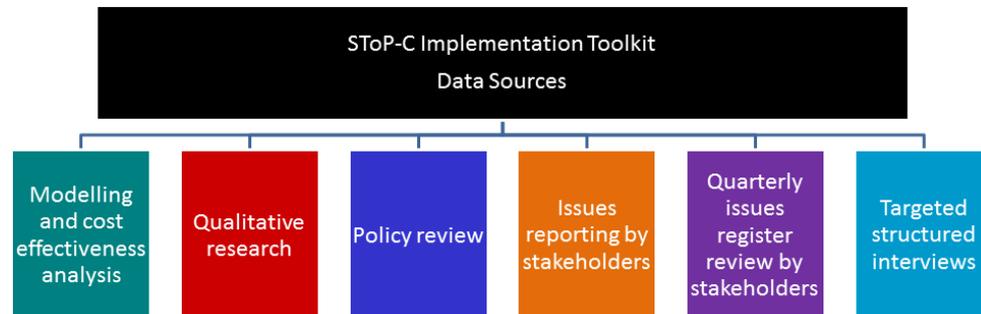
Contacts

## WHAT ARE THE AIMS OF SToP-C?

1. Evaluate the impact of a rapid scale-up of on hep C incidence and prevalence in the prison setting
2. Evaluate patient and provider attitudes and barriers towards therapy for hep C treatment-as-prevention in the prison setting
3. Mathematically model the epidemiological impact and cost-effectiveness of scaled-up hep C treatment in NSW prisons and the community
4. Develop a framework and implementation tool-kit for the scale-up of the hep C treatment-as-prevention intervention in the prison setting in other jurisdictions

## SToP-C IMPLEMENTATION 'TOOLKIT'

The SToP-C Implementation 'Toolkit' will provide a guide for scaling up hep C treatment as prevention in prisons. The Implementation Sub-Committee composed of representatives of all key project partners oversees its development. The core activities which will inform the guide are in progress, with Toolkit draft to commence in 2018.



## QUALITATIVE RESEARCH

This component of the SToP-C study is conducted by the UNSW Centre for Social Research in Health. It involves semi-structured interviews conducted with key stakeholder groups and aims to evaluate attitudes and barriers to the provision of hep C treatment in prisons. Interviews are conducted before and after treatment scale-up.

Despite concerns about re-infection in the absence of primary prevention strategies, prisoners conveyed support for treatment scale-up during pre-treatment interviews (n=32):

*Yeah, the less people that walk around in the general population with it, it's less risk for other people that are going to still use, yeah exactly yeah. ... Yeah, regardless it should all be beneficial because like you said, if people do decide to continue to use, at least they're not going to be ... yeah, there's going to be less people. Everyone's being treated anyway, so yeah there's going to be less people in the jail with it, so there's always going to be less of a risk that other people is going to catch it. (Male, Maximum security, HCV RNA+)*

*But yeah, this new program SToP-C, I reckon it's going to be pretty good. Like everyone that I know who's got hep C like already checked it out or are trying to jump on board with it, so it's good yeah. (Male, Maximum security, HCV RNA+)*

In 2018, post-treatment interviews will be conducted with: prisoners, JH&FMHN staff, CSNSW staff, prisoner family members, policy makers, and advocates.

## SAVE THE DATE – 2018 STAKEHOLDER WORKSHOP



The 5<sup>th</sup> Annual SToP-C Stakeholder Workshop will be held on Monday 19 February 2018 at the Kirby Institute UNSW. Invitations will be circulated soon.

If you would like to attend please contact the SToP-C Project Coordinator (see details overleaf).

Above: Attendees at the 2017 Stakeholder Workshop



*"The SToP-C study builds on our previous research documenting high rates of hepatitis c transmission in NSW prisons, but also the success of the nurse-led model of hepatitis c treatment provided by JH&FMHN which offers the potential to rapidly scale-up treatment through simpler and more effective therapy."*

**PROFESSOR ANDREW LLOYD**  
SToP-C CO-LEAD  
INVESTIGATOR



*"It is incredibly exciting to have started the Treatment Phase of SToP-C, with more than 100 inmates already commenced on therapy. This treatment should cure the vast majority of those who complete therapy, and hopefully will then lead to reduced risk of transmission within the prison setting in New South Wales, where there are extremely high numbers of existing and new hepatitis c infections."*

**PROFESSOR GREG DORE**  
SToP-C CO-LEAD  
INVESTIGATOR

**CONTACT DETAILS**

To find out more about the SToP-C study contact the Project Coordinator:

**Marianne Byrne**

**Phone:**  
02 9385 9984

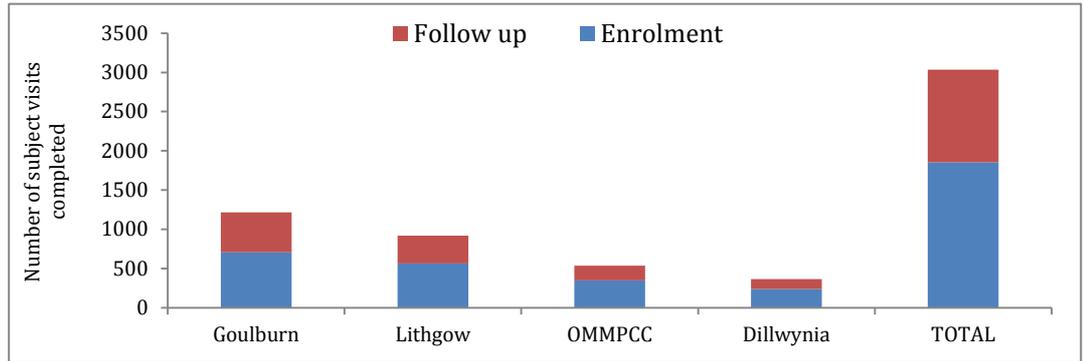
**Email:**  
mbyrne@kirby.unsw.edu.au

This study is funded by a National Health and Medical Research Council Partnership Grant, Gilead Sciences Inc, and the University of New South Wales.

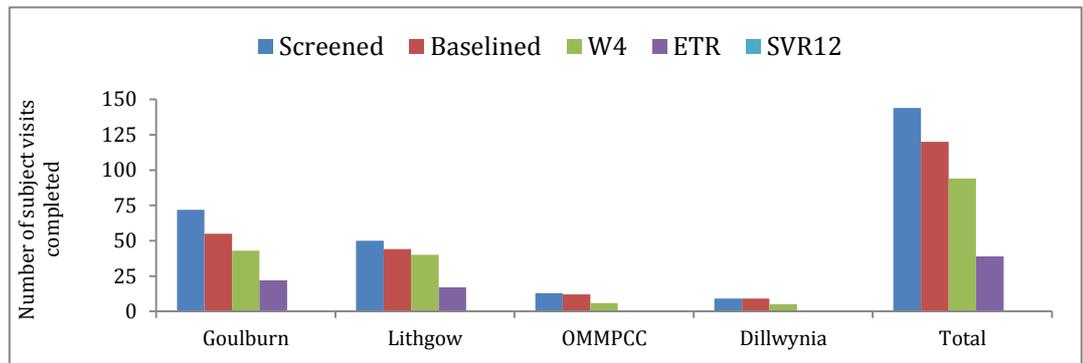
This study has been approved by the Justice Health & Forensic Mental Health Network, Corrective Services and Aboriginal Health and Medical Research Council Human Research Ethics Committees.

**CURRENT STATUS**

Surveillance Phase enrolment to 31 October 2017



Treatment Phase enrolment to 31 October 2017



**SToP-C PARTNERS**



**UNSW**  
SYDNEY



**Justice**  
Corrective Services



**Health**  
Justice Health & Forensic Mental Health Network



**Health**

