

**Effectively integrating hepatitis C  
(HCV) care into HIV care in urban  
HIV clinics in South Texas, USA:  
Targeted Access to Community  
Knowledge, Linkage to treatment  
and Education for HIV/HCV  
(TACKLE HIV/HCV) in people of  
color**

**Waridibo E. Allison MBBS, PhD**

**Trisha V. Melhado MPH**

**Barbara Taylor MD, MS**

**Anmol Desai MPH**

**James Bridges BS**

**LONDON**

**FAST-TRACK CITIES 2019**

SEPTEMBER 8-11, 2019 | BARBICAN CENTRE

SPONSORED BY:



IN PARTNERSHIP WITH:



# Background

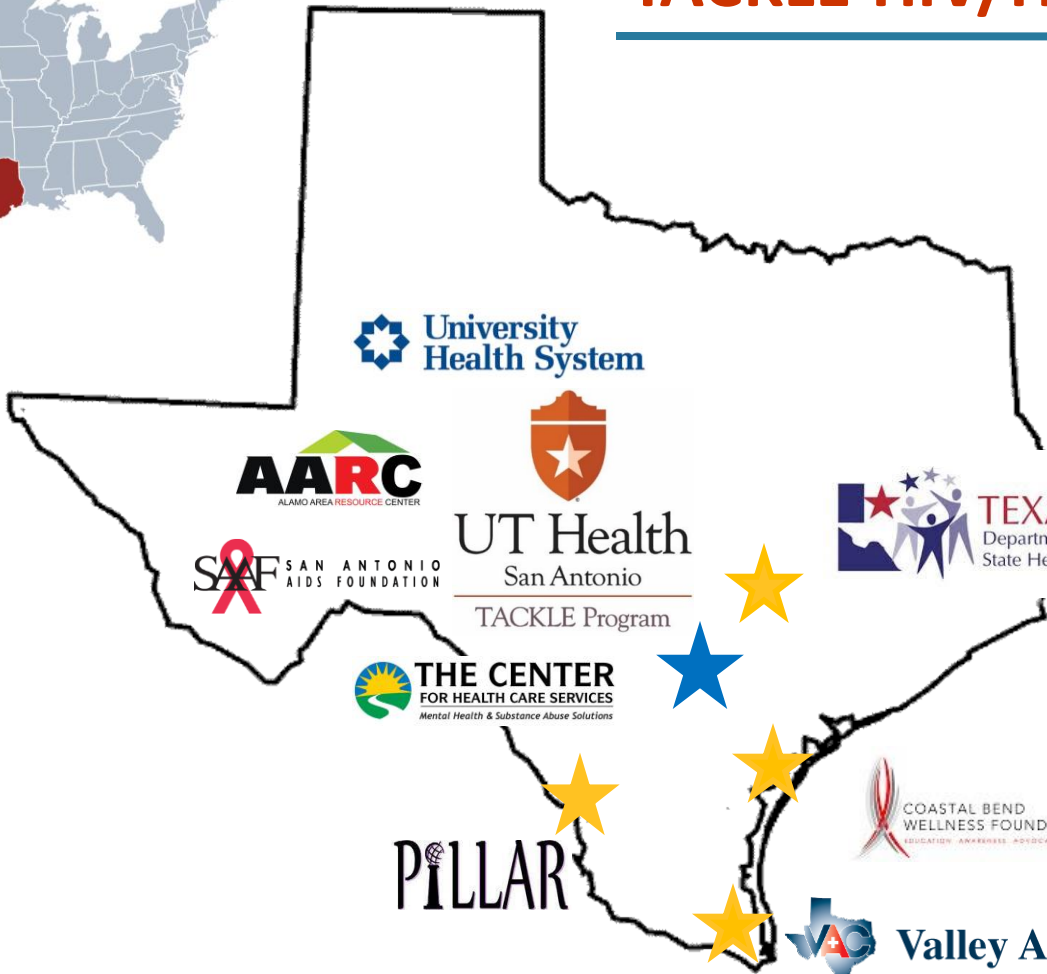
- Approximately 25% of people living with HIV (PLWHIV) in the US are co-infected with HCV
- Plasma HCV RNA levels are higher in matched HIV+ and HIV negative controls and are inversely correlated with CD4+ T lymphocyte counts
- *Co-infected individuals develop histological and clinical features of HCV liver disease more rapidly than those with HCV alone*
- Coinfected PLWHIV are therefore a priority population for HCV care and treatment

Cooper et al. *Can J Infect Dis* 2001;12 (3): 157-163

## PROGRAM GOALS

<b>GOAL 1 - Establishment of a model of integration of HCV services into HIV services and support of substance use disorder/mental health services</b>	<b>GOAL 2 - Provision of provider support including non specialist provider support for HIV/HCV co-infection management and treatment</b>	<b>GOAL 3 - Education about and screening for HIV/HCV in communities predominantly composed of people of color</b>	<b>GOAL 4 - Sentinel surveillance for acute and chronic HCV in people living with HIV (including people of color)</b>
<p><i>Clinic HIV/HCV care model</i></p> <p><i>Fibroscan</i></p>	<p><i>(AETC) National HIV/HCV curriculum dissemination</i></p>	<p><i>Community education and screening events</i></p> <p><i>HIV/HCV Education App</i></p>	<p><i>Enhance TX DSHS acute HCV surveillance</i></p> <p><i>Pilot chronic HCV sentinel surveillance program</i></p>
<p><i>SUD/Depression screening and linkage to support/treatment) Pilot opioid overdose program</i></p>	<p><i>ECHO (Extension of Community Health Outcomes) model</i></p>		<p><i>Pilot data to care</i></p>

# TACKLE HIV/HCV Partnerships



 University Health System

 **AARC**  
ALAMO AREA RESOURCE CENTER

 **SAF** SAN ANTONIO AIDS FOUNDATION

  
UT Health  
San Antonio  
TACKLE Program

 **TEXAS**  
Department of State Health Services

 **THE CENTER**  
FOR HEALTH CARE SERVICES  
Mental Health & Substance Abuse Solutions

 **PILLAR**

 **COASTAL BEND**  
WELLNESS FOUNDATION  
EDUCATION · AWARENESS · ADVOCACY

 **Valley AIDS Council**

# Timeline and processes

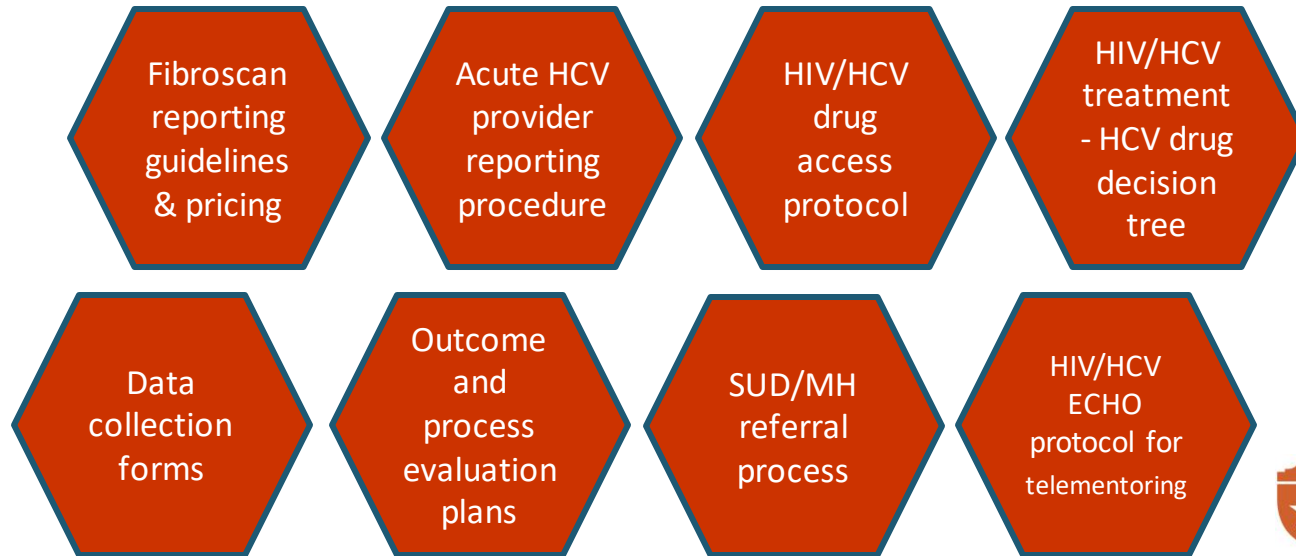


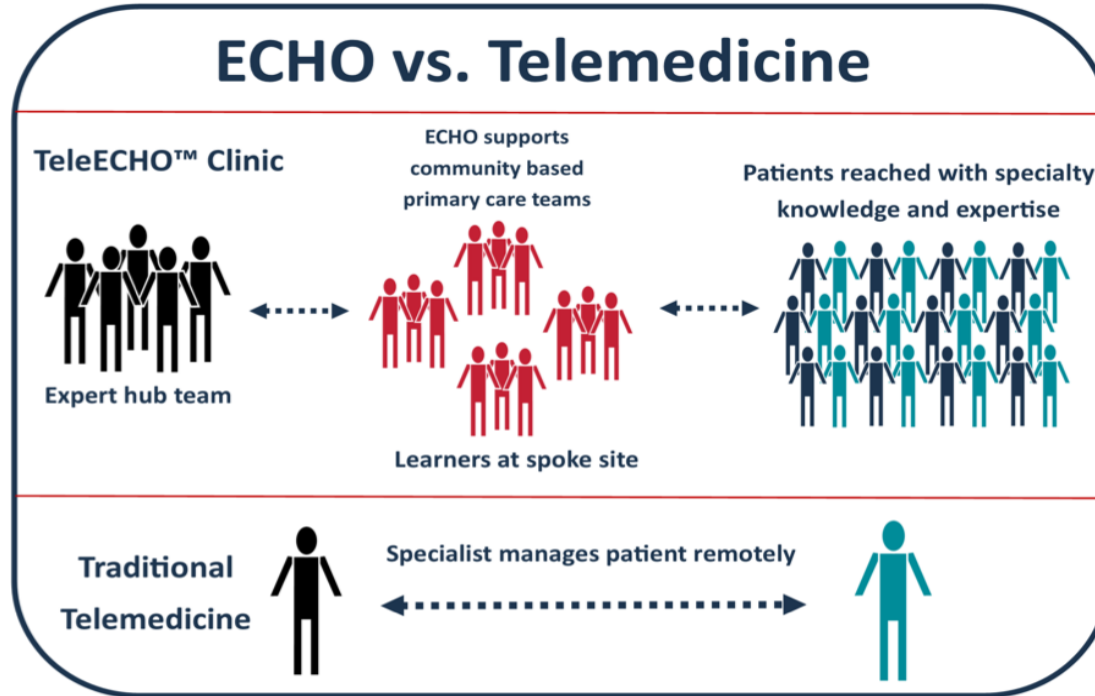
- Established in San Antonio, a Fast-Track City, in September 2017
- Standardized protocols/procedures for HCV screening, diagnosis and treatment were developed in year 1 (planning phase)
- Biweekly meeting with partnering sites occurred with feedback to reach a consensus
- Implementation of a model of integration of HCV services into HIV services began October 2018
- Besides integration of HCV care into HIV care the program also integrates substance use disorder (SUD) and mental health (MH) services
- ECHO (Extension for Community Healthcare Outcomes) telementoring model is used to educate/support HIV providers in treating HCV infection



# HCV care integration into HIV care

Standardized protocols/procedures for HCV screening, diagnosis and treatment:





ECHO model is not “traditional telemedicine”  
Treating physician retains responsibility for managing patient

# Results: TACKLE HIV/HCV

- **764 PLWHIV** screened for HCV infection
- **87 HIV/HCV co-infected individuals identified**
  - *44 awaiting treatment updates*
  - *18 prescribed HCV treatment*
  - *8 completed treatment*
  - *17 achieved SVR*
- **SUD/ MH/ risk factor identification**
  - *50% history of mental health disorder*
  - *30% history of injection drug use*
  - *29% history of incarceration*

## Characteristics of HIV/HCV co-infected clients (N=84)

Age	N (%)
18-35	10 (12)
36-45	26 (31)
46+	48 (57)
Gender	
Male	62 (74)
Female	18 (21)
Transgender	4 (5)
Race/ ethnicity	
Hispanic	58 (69)
N-H White	19 (20)
N-H Black	7 (8)
N-H Other	2 (2)
<b>Uninsured</b>	<b>52 (62)</b>



# Lessons Learned: TACKLE HIV/HCV



- Including stakeholders in the planning phase facilitates implementation processes
- Consistent and constant communication with partnering sites is crucial
- HIV/HCV coinfecting patients require additional support including SUD/ MH services while undergoing HCV treatment – important to have resources and processes in place to address psychosocial patient needs
- With adequate education/support non-specialist primary care HIV providers treat HCV infection
- Addressing HCV infection in PLWHIV can effectively be achieved with an integrated approach to delivering both HIV and HCV care and treatment in one clinic setting



# Acknowledgements – Core team at UT Health San Antonio



## **ID Division/ReACH Center**

Trisha Melhado MPH  
Andrea Rochat MFA  
Julie Parish-Johnson MS, LCDRC CRC  
Keito Kawasaki MPH  
Anmol Desai MPH  
Raudel Bobadilla BS  
James Bridges BS  
Aro Choi MS  
Paula Winkler MEd  
Ariel Gomez BS  
Celeste Rodriguez MPA  
Kelli Williams MA

## **Faculty/Consultants**

Hope Hubbard MD  
Joel Tsevat MD MPH  
Barbara Taylor MD MS  
DeWayne Davidson PharmD  
Margaret Adjei Pharm D  
Carlos Tirado MD MPH FBAM  
Isela Werchen MD  
Wari Allison MD PhD

# Contact/Interact with Us

**TACKLE HIV/HCV Website:**

[www.uthscsa.edu/tackle](http://www.uthscsa.edu/tackle)

**UT Health San Antonio ECHO Website:**

[www.uthscsa.edu/echo](http://www.uthscsa.edu/echo)



Find us on Facebook: [@UTHealthSAECHO](https://www.facebook.com/UTHealthSAECHO)

**General inquiries about UT Health San Antonio ECHO:**

[echoinfo@uthscsa.edu](mailto:echoinfo@uthscsa.edu)

**Program Director - Wari Allison MBBS PhD**

e-mail [allisonw@uthscsa.edu](mailto:allisonw@uthscsa.edu)



[/WariTalks](https://twitter.com/WariTalks)

**Look for TACKLE at IDWeek Oct. 2-6, 2019**