

Liver disease knowledge and acceptability of noninvasive liver fibrosis assessment among people who inject drugs in the drug and alcohol setting: The LiveRLife Study

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Project Collaborators

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Centre for Health Initiatives University of Wollongong



NSW Users and AIDS Association (NUAA)



Hepatitis NSW Hepatitis

Hunter Pharmacotherapy Services

Health Hunter New England Local Health Network

St. Vincent's Hospita



Australian Injecting & Illicit Drug Users League (AIVL)





Background

PWID

- Lack of knowledge = barrier to seeking HCV assessment & Tx
- Higher knowledge = greater likelihood of receiving assessment & Tx
- Liver biopsy = barrier to assessment & Tx
- High willingness to receive Tx **BUT TX UPTAKE IS ~1-2% PER YR**



Aims

To assess...

- Factors associated with baseline knowledge of HCV and liver disease
- Acceptability of transient elastography (TE) assessment (FibroScan[®])
- Willingness and intent to receive HCV treatment



Methods

Study Design

Liver health promotion campaign designed to enhance liver disease assessments via FibroScan® in the drug and alcohol setting among persons with a history of injection drug use

LiveRLife Campaign LIVER LIFE



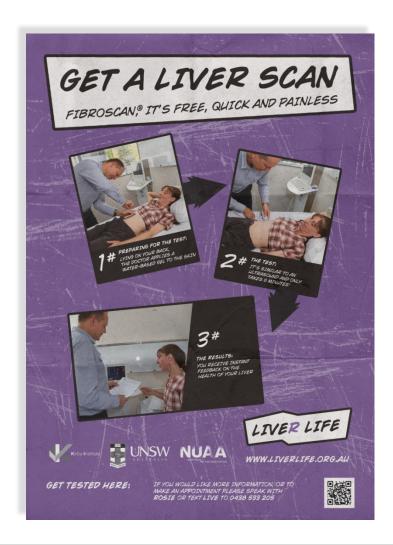
- Phase I: resource development
- Phase II: resource testing
- Phase III: implementation (2014)



Resource Development & Testing

Campaign Messaging

- Focus on liver health
- Main message: Get Tested
- Free, quick, painless
- Real success stories
- Non-technical language
- Positive tone
- Colourful





Methods

LiveRLife Resources

PRINTED RESOURCE



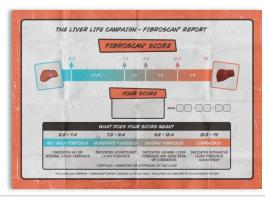
SHORT FILM



CAMPAIGN POSTERS



FIBROSCAN REPORT



STUDY WEBSITE

LIVERLIFE.ORG.AU





Methods

Study Population

- Prospective cohort design
- Aged > 18 years, history of IDU
- No liver biopsy or FS in prior two years
- No current or previous HCV Tx
- Cannot be pregnant

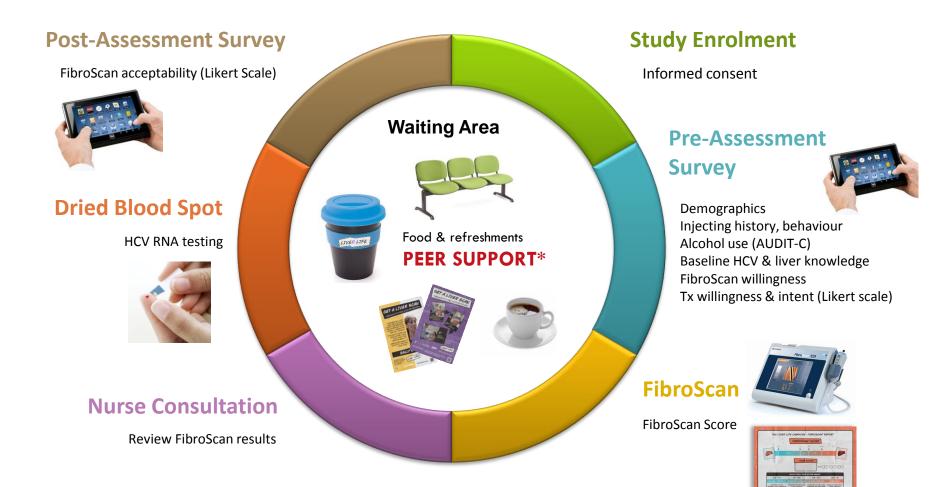
Recruitment from:

- Kirketon Road Centre
- Sydney Medically Supervised Injecting Centre
- Newcastle Pharmacotherapy Service (OST)
- Coffs Harbour Drug and Alcohol Services (OST)





Campaign Day

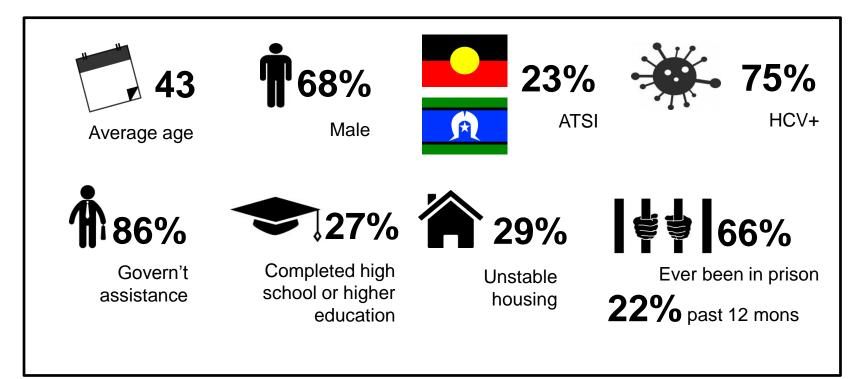






Participants (n=253)

31% injected ≥daily, past mon.30% heroin, last drug injected

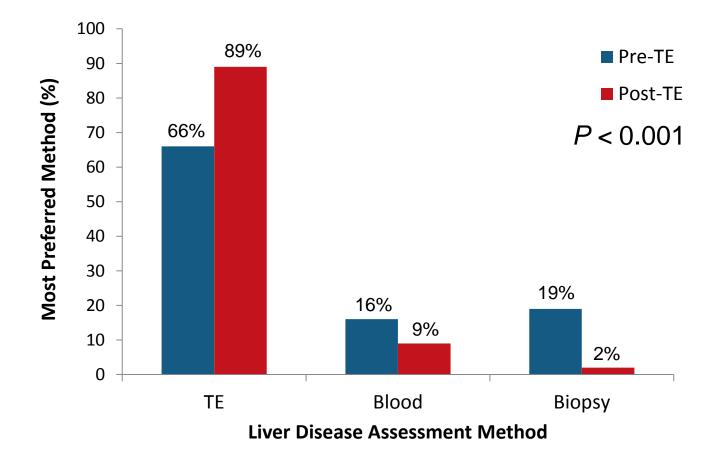




- Median knowledge score 16/23 (70%)
- Less than daily injection (AOR 5.01; 95% CI, 2.64-9.51) and no daily injection in the past month (AOR 3.54; 95% CI, 1.80-6.94) were associated with high knowledge (≥16)
- 88% definitely or somewhat willing to receive HCV Tx
- 56% intended to start Tx in the next 12 mons



Preferred liver disease assessment method





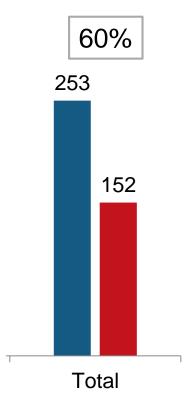
Liver disease burden, baseline





Follow-up (n=152)

Enrolled Follow-up





Discussion

Implications

- Better understanding of liver disease burden
- Improve upon educational interventions
- Increase non-invasive liver disease assessment
- Prioritise treatment



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LiveRLife Participants

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Investigators and Clinic Staff Kirketon Road Centre Newcastle Pharmacotherapy Service Medically Supervised Injecting Centre Coffs Harbour Drug & Alcohol Service

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