HEAD-Start Project Myanmar

CT2 Study
Preliminary Outcomes
Myanmar

Public sector HCV Treatment Program (Quick Start Program Phase I) treated a total of 2,065 HCV patients
Study Design

‘one-stop-shop’ model of care

- PoC HCV RNA test using on-site Cepheid GeneXpert
- GPs initiating treatment

Sites:

- Burnet Institute (BI) Thingangyun Service for PWID
- Myanmar Liver Foundation (MLF) Than Sitt Charity Clinic
Time from RNA test to DAA prescription

TAT from RNA test to DAA prescription, including specialist reviews

- Median of 4 days (IQR: 3, 7) for Bl Clinic
- Median of 2 days (IQR: 2, 4) for MLF Clinic
Conclusions

- Model of care is feasible, safe and effective
  - Possible to implement at NSP site; clinic site renovated to fit clinical requirements

- Retention in care is exceptional
  - In particular, through diagnostic pathway and then onto treatment
  - Similar among PWID and general population

- SVR12 rates are very good, similar across both sites

- Evidence for model of care implementation in Myanmar, planning for expansion of services
Acknowledgements

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