2nd Central and Eastern European Meeting on Viral Hepatitis and Co-Infection with HIV



# HIV/HCV Co-infection: Local Situation in Georgia

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**Estimated number: 9 600** 



Source: WHO/Europe; ECDC

### **Comprehensive Care Package** for PLHIV in Georgia



HIV/AIDS				_
	Hepatitis C			
to antiretroviral therapy (ART)	Free HCV	Tuberculosis		
	Treatment	Free treatment for TB, including for MDR-TB	Addiction	
			Free methadone substitution treatment	

# Universal Access to ART and Evolving Treatment Initiation Criteria



#### **Immediate ART regardless of CD4 cell count**



#### **Cascade of HIV Care** 9,600 10,000 8,000 # of persons 6,000 4,935 3,767 4,000 3,044 2,550 2,000 **51%** 76% 81% 84% 0 **HIV** infected **HIV** diagnosed On ART Virally In care (estimated) suppressed 100% 51% 39% 32% 27%

Georgia has 5<sup>th</sup> highest HCV prevalence in the world and the highest among former Soviet Union countries



	anti HCV +	HCV RNA +
Egypt	14.7%	10.0%
Cameroun	11.6%	
Gabon	11.2%	10.1%
Mongolia	10.8%	7.5%
Georgia	7.7%	5.4%
Uzbekistan		4.4%
Russia	4.1%	
Kazakhstan	3.3%	
Azerbaijan	3.1%	
others		

Gower E et al. J Hepatol. 2014;61:S45-S57.

# **HIV/Viral Hepatitis Co-infections**



Total non-IDU IDU



# Management of HIV/HCV Co-infection



- Screening at entry
- Dual therapy with Peg-Interferon and Ribavirin (2011-2015)
- DAA containing regimens (since 2015)

# Free PEG/RBV Treatment Program Preliminary Outcomes







# National Hepatitis C Elimination Program



The Goal of the National Hepatitis C Elimination Program



Elimination of HCV infection in the country (zero new infections) through identifying and treating all hepatitis C patients strengthened by effective prevention interventions



### National Hepatitis C Elimination Program





# Treat more than 9,000 patients:

- F3/F4 fibrosis
- Severe extrahepatic manifestations
- HIV/HCV co-infection



Massive roll-out of all possible evidence-based interventions including seek, test and treat

# HCV Care Cascade, August 9, 2016





### Completed Treatment (n=8,688) August 9, 2016



# SVR in Patients with Complete Data, August 9, 2016 (n=2,515)

	SVR Rate				
	G1	G2	G3	G4	Total
IFN/SOF/RBV -12 weeks	<mark>82,6</mark> (580/702)	<b>97,3%</b> (178/183)	<b>96.6%</b> (708/733)	<b>100,0%</b> (1/1)	<mark>90,6%</mark> (1467/1619)
SOF/RBV – 12 weeks	<b>100,0%</b> (2/2)	<b>80,1%</b> (157/196)	_	_	<b>80,3%</b> (159/198)
SOF/RBV – 20 weeks	<b>100,0%</b> (1/1)	<b>76,5%</b> (104/136)	<mark>0%</mark> (0/1)	-	<b>76,1%</b> (105/138)
SOF/RBV – 24 weeks	<b>57,6%</b> (171/297)	<b>0%</b> (0/1)	<b>83,1%</b> (216/260)	<b>50,00%</b> (1/2)	<b>69,3%</b> (388/560)
Total	<b>75,3%</b> (754/1002)	<b>85,1%</b> (439/516)	<b>92,9%</b> (924/994)	<b>66,7</b> (2/3)	<b>84,3%</b> (2119/2515)

# HIV/HCV Care Cascade, October 1, 2016



#### Completed Treatment with Sofosbuvir-based regimens (n=232). October 1, 2016



# SVR in HIV/HCV co-infected Patients with Complete Data, October 1, 2016 (n=211)

	SVR Rate				
	G1	G2	G3	G4	TOTAL
12 weeks IFN/SOF/RBV	<b>78.0%</b> (32/41)	<b>96.4%</b> (27/28)	<b>100.0%</b> (43/43)	<b>100.0%</b> (1/1)	<b>91,1%</b> (103/113)
12 weeks SOF/RBV	-	<b>75.9%</b> (22/29)	_		<b>75.9%</b> (22/29)
20 weeks SOF/RBV	-	<b>80.0%</b> (12/15)	_		<mark>80.0%</mark> (12/15)
24 weeks SOF/RBV	<b>68.4%</b> (13/19)	_	<b>87,9%</b> (29/33)	<b>100.0%</b> (2/2)	<mark>81.5%</mark> (44/54)
TOTAL	<b>75.0%</b> (45/60)	<b>84.7%</b> (61/72)	<b>94,7%</b> (72/76)	<b>100%</b> (3/3)	<b>85.8%</b> (181/211)



# 90-95-95

# By 2020

✓ 90% of people living with HCV are diagnosed

✓ 95% of those diagnosed are treated

✓ 95% of those treated are cured

# **Acknowledgements**











MINISTRY OF LABOUR HEALTH AND SOCIAL AFFAIRS





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