

“it is not just a care”

Haemodialysis Patients free from HCV Infection in Qatar: A Multidisciplinary Approach

Mohammad Dawood RN, Iman Khater RN, Farrukh ali CHT, Sahar Aly RN, Adel Raja RN, Hoda A/hamid RN, Wafa Ali RN, Aisha Elsayed RN, Shajahan Joseph CHT, Mohd Amin MD, Abdullah Hamad MD, Moutaz Darbela MD, Fadwa Al-Ali MD

Background

Hepatitis C is an infectious disease caused by the hepatitis C virus (HCV). Chronic hepatitis C develops in most people infected with HCV and can cause serious complications, such as end-stage liver disease. Although no vaccine is available to protect against hepatitis C, interventions can prevent HCV transmission. HCV infection can be treated with antiviral drugs and, in most cases, successfully cured, reducing the risk of morbidity/mortality and theoretically risk for transmission. Qatar National Plan for HCV control by 2020 was launched in December 2014, elaborated by a group of stakeholders from the Qatar ministry of Public Health and Hamad Medical Corporation. Then Approved and adopted by the Qatar Government (MOPH). In 2017, WHO accepted to support the development and implementation of national multispectral policies and strategies for hepatitis C prevention and control in Qatar, based on local epidemiological context of HCV. The prevalence of HCV in Haemodialysis patients in Qatar is 8.4%. Since the launch of the Qatar plan for “HCV control by 2020”, the treatment of HCV in Haemodialysis patient has been a challenge.

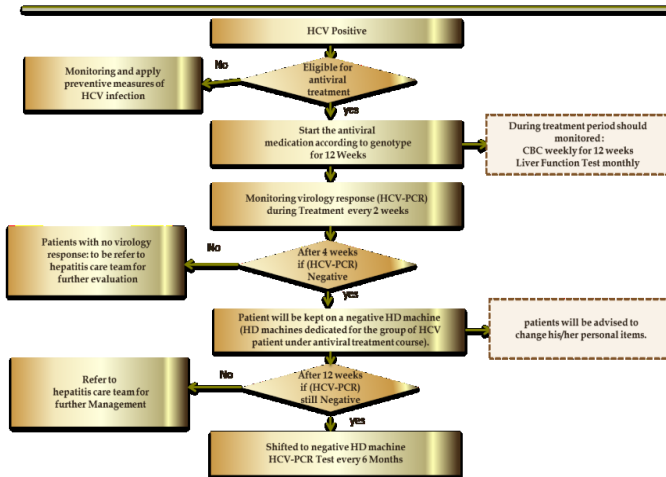
Aim

to cure 100 % in HCV patients in dialysis population and we aim to explore the effectiveness and safety of hepatitis C treatment in (September 2017- June 2018).

Method

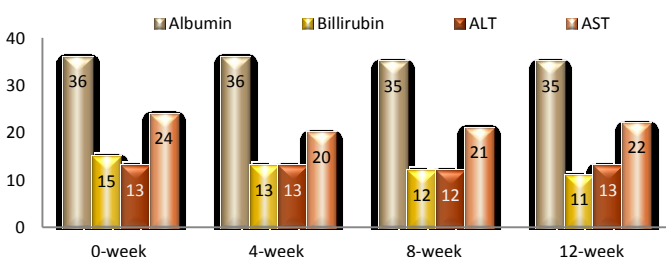
Non-Interventional, single-Center cohort study, including retrospective collection of real world data on 64 Hemodialysis patients infected with HCV, 31 of them completed the 12 weeks treatment and 12 weeks follow up period. Using of Ombitasvir, Paritaprevir, and Ritonavir (Viekirax) has been accepted as a treatment option in this group of patients.

HCV-Treatment in dialysis population



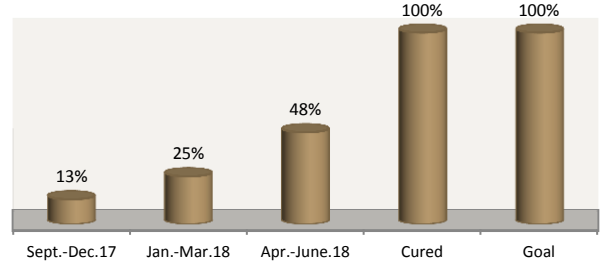
Result

LFT level during HCV-Treatment period

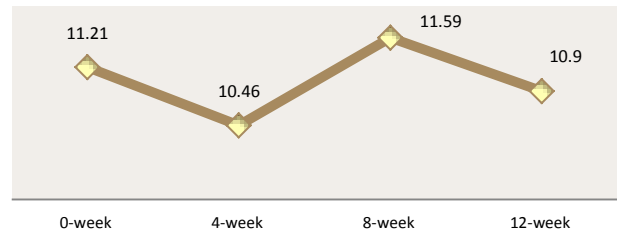


Cont. Result

Percentage of Dialysis Patients Treated & Cured from HCV



Haemoglobin level during HCV-Treatment period



Outcome

from 64 HCV positive Patients we initiate the treatment for 31 patients for 12 weeks and 100% of them cured, during the treatment biochemical values was within normal limits.

Conclusion

- The outcome of first phase treatment of Hepatitis C in patients on HD is highly effective, it was 100 %.
- Hematologic adverse events, which were frequently observed among HD patients receiving ribavirin-based antiviral regimens, were rare during treatment.
- Successful HCV antiviral treatment will decrease the risk for infection transmission within dialysis units, and reduce the occurrence of complications occurring after kidney transplantation.

Sustainability

- Regular Screening of all Dialysis Patients for Hepatitis C infection
- If a new patient found to be hepatitis c positive, will be enrolled to Hepatitis C management. Program

Lesson Learnt

- A Successful management of hepatitis C infection in dialysis unit, we will start 2nd phase to cover all dialysis patients and to achieve our goal “ Qatar free from HCV”

References

- WHO Guidelines on Hepatitis B and C Testing. Geneva:World Health Organization; 2017 Feb. PubMed PMID: 28742301.
- Sharma M, Al Kaabi S, John AK, Al Dweik N, Ullah Wani H,Babu Thandassary R, Derbala MF, Al Eiji K, Sultan K, Pasic F, Al Mohammadi M, Yacoub R, Butt MT, Singh R. Screening forhepatitis C in average and high-risk populations of Qatar using rapid point-of-care testing. United European Gastroenterol J. 2015 Aug;3(4):364-70.
- Mohamoud YA, Riome S, Abu-Raddad LJ. Epidemiology of hepatitis C virus in the Arabian Gulf countries: Systematic review and meta-analysis of prevalence. Int J Infect Dis.2016 May;46:116-25.