OP-3 HCV MICROELIMINATION PROGRAM IN HEMODIALYSIS PATIENTS: SUCCESS OF A MULTI-STAKEHOLDER PARTNERSHIP BASED ON A NATIONAL ERADICATION STRATEGY

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Introduction and Objectives: Direct-acting antivirals (DAAs) are highly effective in patients with chronic kidney disease in hemodialysis and chronic hepatitis C (HCV). The treatment of HCV in this population brings multiple benefits, including improved survival of the patient on dialysis and reduction of contagion in the dialysis room by achieving eradication. Our aim was to evaluate the effectiveness of DAA treatment in this population in routine clinical practice in Argentina using a multidisciplinary network of nephrologists and hepatologists, within the framework of the national micro-elimination strategy of the Viral Hepatitis Program of the Ministry of Health.

Materials and Methods: In this prospective multicenter cohort study, all patients on dialysis at Fresenius Argentina, were screened for anti-HCV. All HCV RNA- positive patients were offered treatment with Sofosbuvir/Velpatasvir (SOF/VEL) and Glecaprevir/Pibrentasvir (GP) according to national guidelines. FIB-4 and APRI scores, and liver stiffness (LSM) when available, were performed in all HCV RNA-positive patients before treatment. Those with F3-4 by LSM, FIB-4 >3.25 and/or APRI >1.5 were evaluated by a hepatologist. DAAs therapy was initiated in each dialysis unit under the supervision of hepatologists by telemedicine.

Results: A total of -10,144 patients from all hemodialysis units were evaluated between January 2018 and December 2022. A total of 323 (3.18%) were anti-HCV positive, of which 149/323 (46.13%) had detectable HCV RNA. Genotype 1 was the more prevalent (69%) and most patients had mild fibrosis (26% had F3-F4). By May 2023, 82 patients were evaluated 12 weeks after the end of treatment:76 achieved SVR (92,6%), 3 died, 1 stopped treatment due to intolerance, and 2 were lost to follow-up.

Conclusions: A multi-stakeholder partnership model as a national micro-elimination strategy increased the treatment rates for HCV in dialysis units with acceptable effectiveness in this special population. This microelimination model is on the way to the WHO elimination program for 2030.

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OP-4 DEVELOPMENT AND EXTERNAL VALIDATION OF A MODEL TO PREDICT MULTI-DRUG RESISTANT BACTERIAL INFECTIONS IN PATIENTS WITH CIRRHOSIS

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Introduction and Objectives: Empirical antibiotic treatment for suspected infections in cirrhosis is crucial. This study aimed to