

# CATALYSE THE UPTAKE OF UNDER-UTILISED TOOLS FOR PREVENTION OF HEPATITIS C - CUTTS HEPC

A UNITAID FUNDED PROJECT

## SNAPSHOT

#### **DATES**

January 2023 – March 2027

#### **COUNTRIES**

Armenia, Georgia, Tanzania

#### **OBJECTIVE**

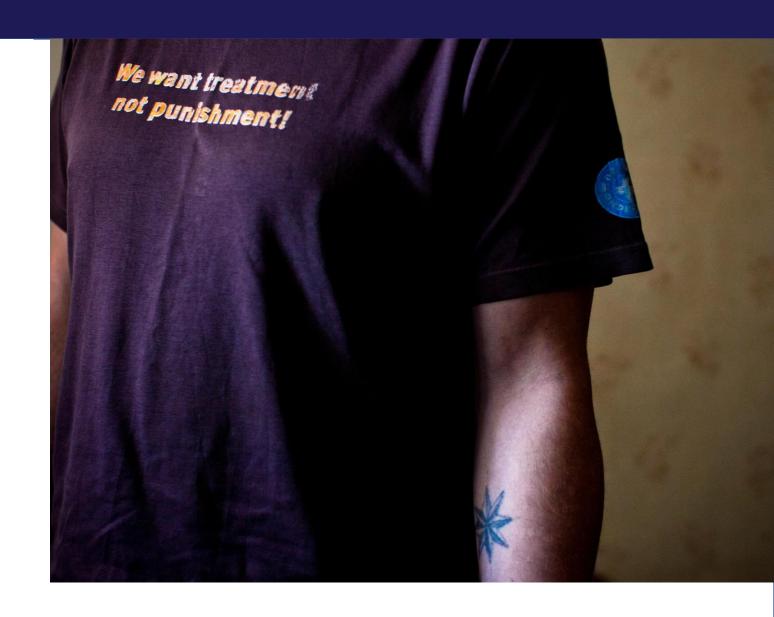
Contribute to closing the HCV prevention and testing gap: through increased access to new / underused tools for prevention, enhanced simplified testing protocols and through 'treatment as prevention' approach, in marginalized populations in LMICs

#### **CONTRIBUTION**

\$9,363,092

#### **DONOR**





## CUTTS HEPC CONSORTIUM APPROACH









GENERATE EVIDENCE ON FEASIBILITY, (COST) EFFICIENCY AND COMMUNITY VALUES AND PREFERENCES

ASSESS DEMAND, SUPPLY & COSTING

**ENGAGE COMMUNITIES** 

ENABLE EFFECTIVE TRANSITION
AND SCALE UP

## 3 STUDIES

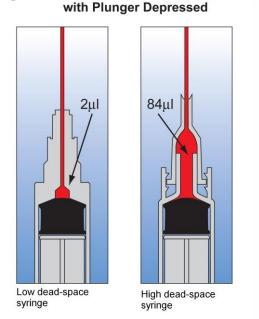
### INTRODUCTION OF NEW / UNDERUSED TOOLS FOR HEPC PREVENTION

Long-Acting Depot Buprenorphine (LADB)



Low Dead Space Syringes and Needles (LDSS/N)

Figure 1: Mean Volume of Fluid Retained



### IMPLEMENT A SIMPLIFIED TESTING PROTOCOL AND INTEGRATION OF HCV CARE



- > To evaluate community values and preferences (acceptability)
- ➤ To determine the feasibility, effectiveness and costeffectiveness
- ➤ To model the potential public health and budgetary impact in case of scale up

## UNITAID FUNDED 3 CONSORTIA





Vietnam
Ukraine
India
South Africa
Nigeria



Tanzania Armenia Georgia





Egypt Nigeria Kyrgyzstan







**INPU** 







## KEY OVERALL ACHIEVEMENTS

- 3 "master" protocols fully approved by WHO Ethics Review Committee + 7 country protocols developed, reviewed by WHO and under review by national and institutional ethics committees
  - ➤ Additional level of complexity, still to be (partly) structured, BUT a significant leverage effect
- Interest from the HCV international community: 1 pre-conference event at HRI23 conference in Melbourne, 2 sessions + 1 poster at INHSU23 conference in Geneva, 1 session at INHSU24 conference in Athens
- A functional Community Advisory Board made up of representatives from all the target countries and regions
- Structuring our consortium with a first consortium agreement signed





# FOCUS TANZANIA

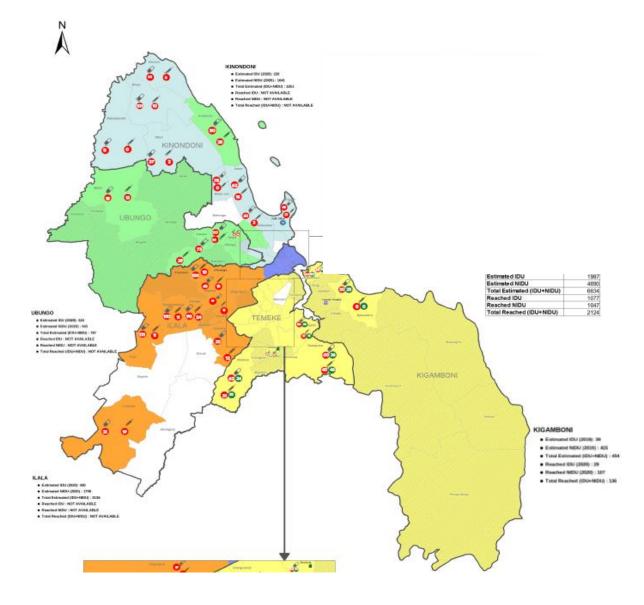
#### **ALL 3 STUDIES IMPLEMENTED**

- Long-Acting Depot Buprenorphine (LADB)
- Low Dead Space Syringes and Needles (LDSS/N)
- Simplified HCV model of care

Dar es Salam

**STUDY SITE** 

#### HARM REDUCTION NEEDS AND INTERVENTIONS FOR PEOPLE WHO USE DRUGS IN DAR ES SALAAM



## WHAT IT MEANS TO MDM TANZANIA

A research project differs from classic MdM interventions (service delivery, advocacy) – it requires:

- A structured, systematic methodology
- Ethical approvals from relevant bodies
- Detailed documentation and quality data for replicability and analysis

- > Stakeholders need to be people with capacity and allowance
- ➤ Participants need to be extensively informed and give informed consent
- ➤ Research protocols: highly technical, need to be simplified for correct information to beneficiaries

## ACHIEVEMENTS

#### **ENGAGEMENT WITH AUTHORITIES**

- Introduction of the project to the Authorities (MoH, Drug Control and Enforcement Authority / DCEA)
- MDM received commitment letters from our partners Temeke Regional Referral Hospital, TanPud and DCEA, which is a plus for ethical clearance
- 14 healthcare workers from Temeke hospital's MAT clinic, TB clinic and emergency department and MDM staff were trained on the LADB study

#### **WHERE WE ARE**

- The CUTTS research project team is identified and recruited (Principal Investigator / PI, study coordinator, site investigators, study nurses and outreach workers)
- MoU signed (April 2024) with 5 implementing partners / local civil society organizations (MUKIKUTE, MEFADA, STEPS, YOVARIBE and PEER to PEER) – MoU with hospital and DCEA in preparation

### CHALLENGES

- 1. Long processes of applying for and receiving ethical clearance
- 2. Research project being new to the Tanzania mission, it needs some adaptation and some training in research skills
- 3. Long processes for registration of new medicines and medical devices in the country; processes that are new to the mission

## NEXT STEPS

- Submission of protocols to NIMR (National Institute for Medical Research)
- Signing MoU with DCEA and Temeke Regional Referral Hospital
- Training the research team
- Introduction (2<sup>nd</sup> time) of the project to authorities after the ethical clearance
- Registration and importation of all medicines and medical devices

# FOCUS ARMENIA

#### **2 STUDIES IMPLEMENTED**

Low Dead Space Syringes and Needles (LDSS/N)

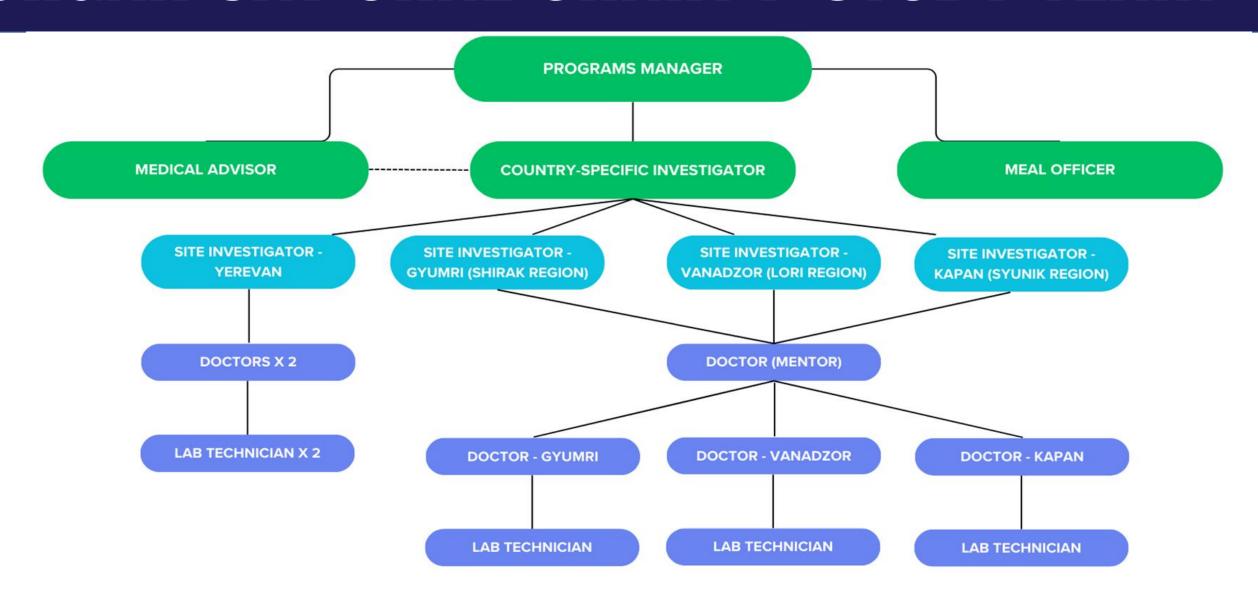
Simplified HCV model of care

#### **STUDY SITES**

Yerevan Shirak Lori Syunik



# ORGANISATIONAL CHART / STUDY TEAM



# OUR PARTNERS



## ACHIEVEMENTS

- Identifying the study partners and HR set-up (study doctors, nurses, peer workers, and other staff) + on-the-job training for doctors and nurses
- All protocols are finalized and submitted to WHO IRB, Alfred HREC, and NCID EC
- Cooperation with MSF on referral of beneficiaries falling under exclusion criteria
- Partnership agreements & budgets finalized and signed
- Procurement of HCV rapid diagnostic tests and LDSS/N in progress
- The MoH has requested MDM to assist with the HCV treatment decentralization process in Armenia through our study: 3 medical centers were included so that their doctors are trained for the full HCV treatment decentralization process after the study
- The MoH will provide free-of-charge HCV treatment (SOF/VEL) for study participants, as a result of our advocacy efforts.
- NCID will provide free-of-charge HBV vaccination for our study beneficiaries.

# CHALLENGES

There are no challenges for us 😇 💪





### CHALLENGES

#### WELL, HERE ARE ACTUAL CHALLENGES))

- Unstable political & economic situation in Armenia risk of war or military conflict
- Frequent changes in the management of medical partners
- Potential impact on the studies due to the replacement of the Minister of Health & associated changes in the HCV National Strategy
- Lack of complete and accurate official statistics on HCV in the country
- Drug use is criminalized, as in Georgia and Tanzania
- Lengthy internal processes at MDM... increased by the multi-layer configuration