

**TRAINING MANUAL FOR
TREATMENT ADVOCATES**

**HEPATITIS C VIRUS
& COINFECTION
WITH HIV**

Section 11:

PUSHING FOR SIMPLER, MORE AFFORDABLE HCV TESTS

- **HCV can effectively be cured for 95% of people with the new DAAs, yet less than 2% of individuals have been diagnosed.**
- The path to similar coverage of HCV diagnosis will require a significant increase in political and financial commitments.
- HCV diagnosis will need to be streamlined and implemented across a range of settings outside hospitals, or even primary care and community health clinics.

- HCV diagnosis is a two-step process:
 1. Screening with an antibody test
 2. RNA test is required to confirm chronic HCV infection
- Makes diagnosis more costly and time consuming.
- Difficult for people to take time off work or commute to health care sites for the series of tests, often people are lost to follow up.
- Individuals and health care workers also are not sufficiently aware of HCV risks and HCV treatment.

Expensive diagnostics costs

- Few health systems cover viral load tests through public insurance plans.
- In many low- and middle-income countries, HCV viral load tests are nearly **double the cost of HIV viral load tests**.
- In the private sector, HCV viral load tests are frequently **twice as costly as these tests in the public sector**.
- Genotyping tests are particularly expensive, and generally the most costly step of the diagnostic process. These high prices are exacerbated by the fact that many individuals must pay for the tests **out of pocket**.

Unique national health systems

- Optimal screening and testing steps will remain specific to local contexts.
- **To increase the number of people on treatment, expansion of screening programs are required.**
- Significantly more antibody tests would be needed to identify one person for a confirmatory RNA test.
 - In a screening program within a population with a 2% prevalence rate, 1 out of 50 people would test positive for HCV and require confirmatory testing. The antibody tests are quoted at **US\$1 per test**, but this can be cost-prohibitive for resource-limited countries.
- **The development of additional, reliable antibody tests is needed to promote competition and reduce prices.**

Move away from centralized process for HCV confirmatory tests

- Instead, an ideal confirmatory test would use capillary (fingerstick) blood samples, provide results in less than 15 minutes, and cost less than US\$5 per test.
- Target this technology for use by community health workers and thereby allow for a scale-up of testing approaches **outside hospitals or primary care clinics.**
- Large numbers of tests needed in countries with high disease burdens require large machines that can run confirmatory tests for many diseases like HIV, HCV, and TB at the same time.
- Cepheid's GeneXpert. machine is the most flexible, commercially available platform, yet it requires a disease-specific cartridge to run the tests.
- Difficult to increase the number of people tested in national HCV programs in order to see prices fall at a rate similar to HIV tests: Monopoly on Cepheid's GeneXpert.

Ramp up diagnostics advocacy

- Push for better integration of HCV testing into existing laboratory systems that test for many diseases at the same time.
- Requires governments to plan and negotiate for the purchase of tests needed for multiple diseases like HIV, HCV, and TB (or bundled procurement) to get cheaper pricing and discounts.
- Price markups on HCV tests applied by local distributors need to be controlled.
- Call on companies to impose price caps to gain control over their products.
- Demand government to lift customs fees or value-added taxes on essential diagnostics.
- **Greater access to diagnostics will be essential to generating the volume of procurement necessary to see the biggest generic price reductions.**
- Making process to diagnose a person simpler is an important part of linking more people to treatment and care.

ADVOCACY EXERCISE

Discussion Questions:

1. What are some of the barriers to getting tested for HCV in your country or area?
2. Does your insurance cover the test costs? Which ones?
3. Do you know how much you need to pay out-of-pocket for the tests?

Action Steps:

1. How can we make the process and sequence of tests easier and more accessible for more people?
2. What are some additional programs and supports needed for people seeking the necessary follow up tests?
3. What are some campaign ideas to convince government officials to scale up testing?