

HCV treatment eligibility

All patients with a diagnosis of chronic HCV infection (HCV VL detected) are eligible for treatment.

However, due to the limited resources available, eligibility could vary from time to time. Please refer to the project's available resources and eligibility criteria for treatment.

A. General Eligibility Criteria

- HIV infection controlled on ART (HIV viral load < 1000 copies/mL) *
- Controlled opportunistic infections
- Hemoglobin threshold: 9 g/dL (only for patients that will need Ribavirin)
- Treatment using pangenotypic DAA regimens is recommended for the treatment of all adults, adolescents and children ages 3 years and above with chronic hepatitis C infection, regardless of stage of liver disease:

Priorities for starting HCV treatment:

- Advanced liver disease: F3 or F4. Or APRI > 1.5 Or FIB-4 > 3.25
- For those with cirrhosis, priority if compensated disease (Child Pugh A).

**We strongly recommend all HIV-HCV co-infected patients to be on ART, regardless of CD4 count.*

B. Exclusion Criteria

- Evidence of hepatocellular carcinoma (or any other neoplasia)
- Advanced/terminal heart or pulmonary or renal or other terminal disease.
- Active uncontrolled OI – especially non-treated or not effectively treated tuberculosis
- HIV VL >1000 copies/mL
- Pregnancy or planning pregnancy in following months, unwillingness to use contraception.
- Breastfeeding women.
- Uncontrolled severe psychiatric disease
- Unwillingness of the patient to adhere to the treatment and all appointment requirements.

C. Referral Criteria to Hepatologist

- Decompensated cirrhosis
- History of previous DAA failure
- Untreated HBV coinfecting cases and have a high risk of HBV flare