



Hepatitis C Screening In Gay, Bisexual, Other Men Who Have Sex With Men Living With HIV: A Re-Audit



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INTRODUCTION

- Hepatitis C Virus (HCV) is a leading cause of chronic liver disease worldwide.¹
- HCV is a blood borne virus that is most commonly transmitted by sharing needles or other equipment to inject drugs but can also be transmitted through sexual contact.^{1, 2}
- The prevalence of HCV infection is higher in gbMSM living with HIV compared to general population.²
- Both national guidelines (HPSC) and international guidelines (EASC) recommend at least annual HCV screening for gbMSM living with HIV, with more frequent screening (every 3 – 6 months) for those with ongoing high-risk exposures.^{3, 4}
- A previous audit in our service demonstrated suboptimal screening rates of 27% over a 12-month period (2024).

AIMS

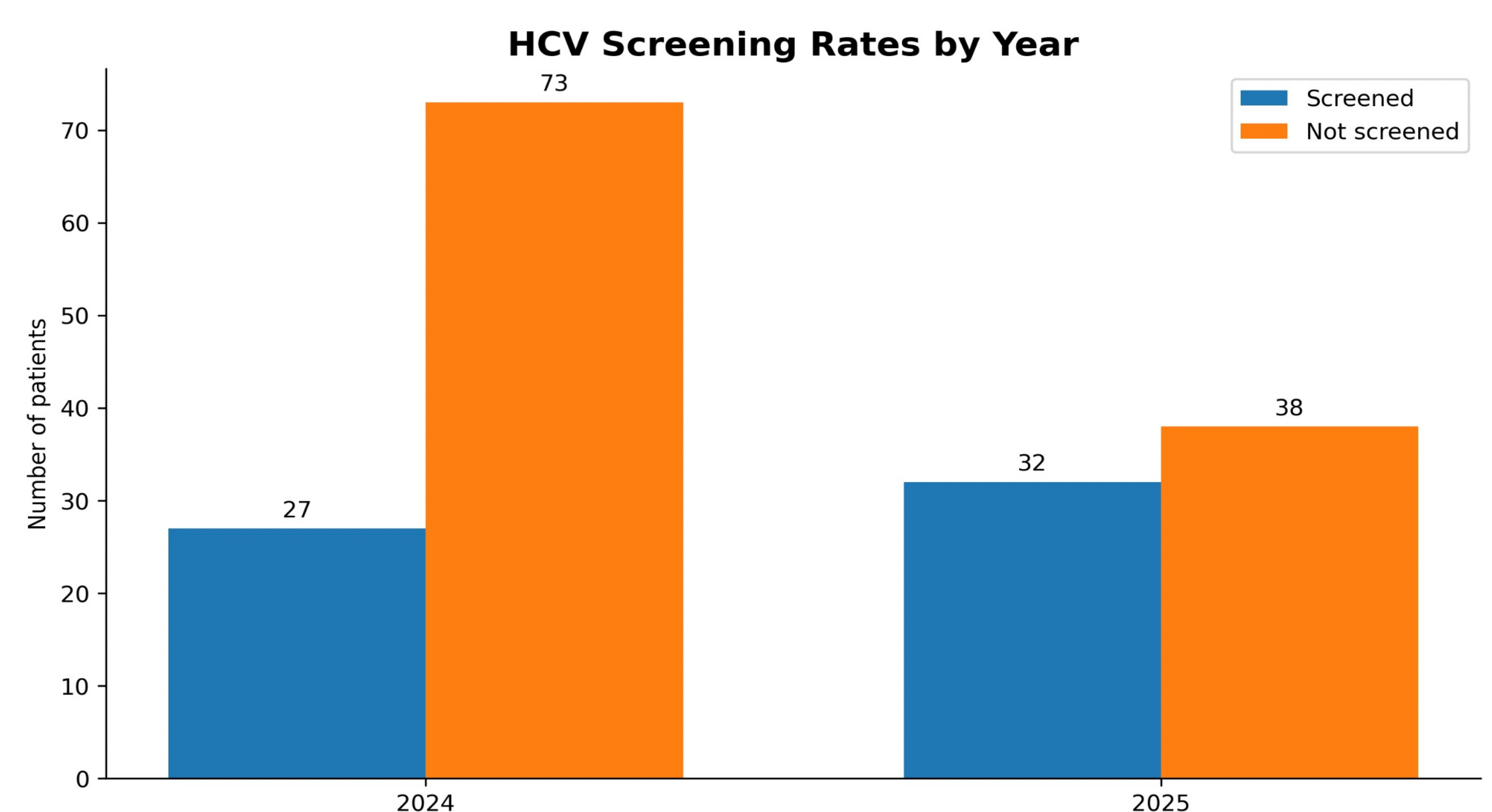
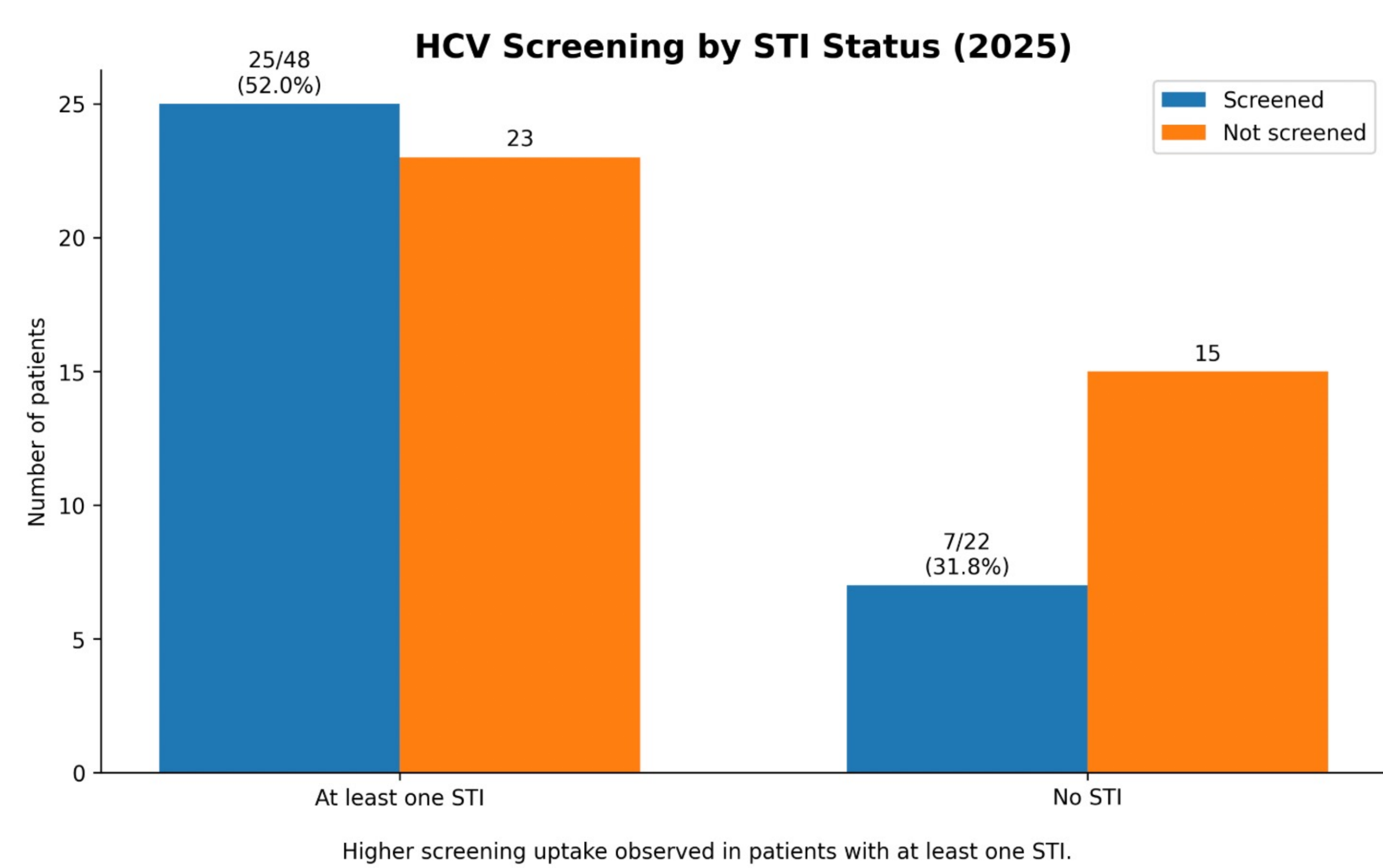
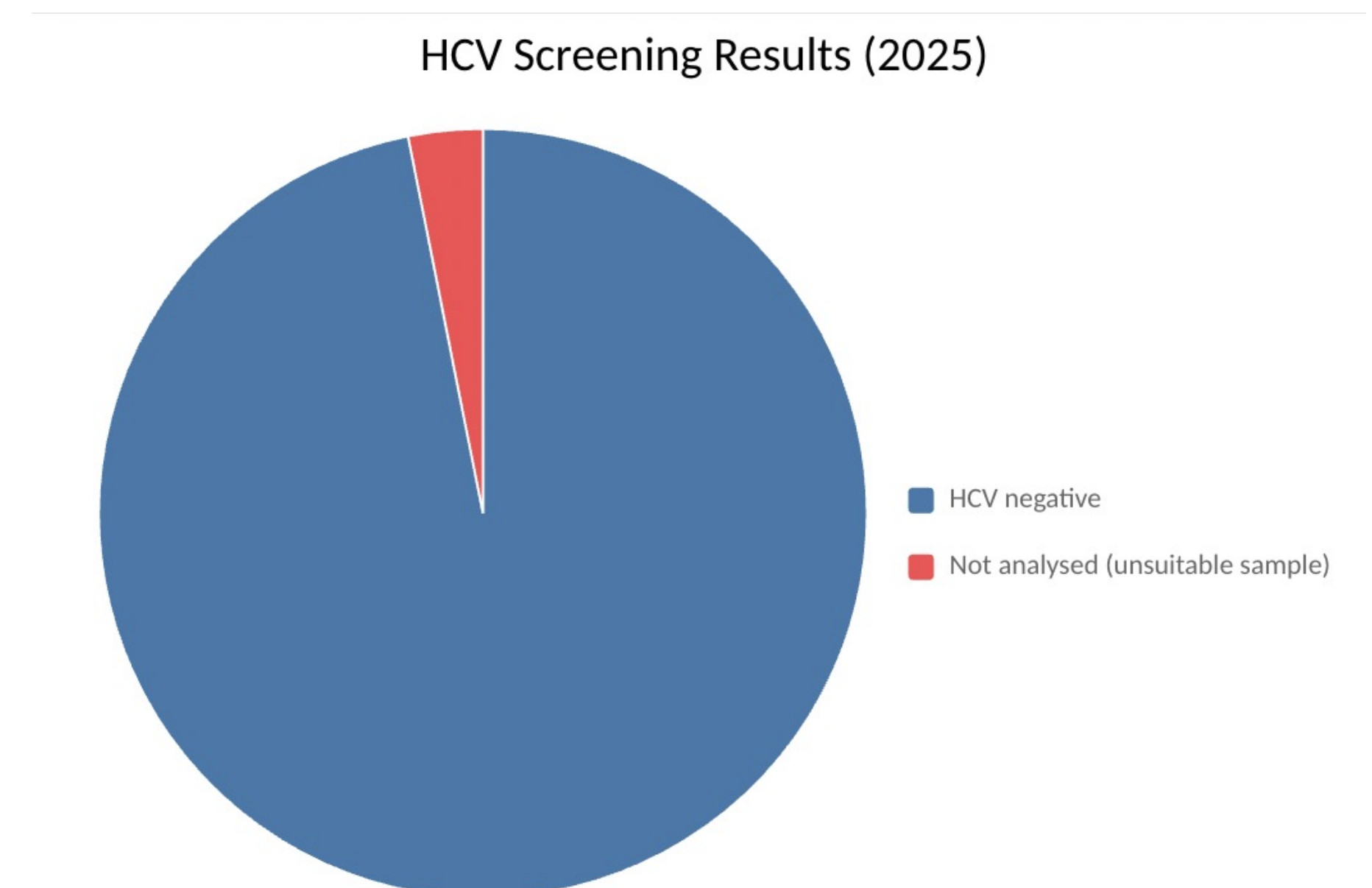
- To re-audit HCV screening rates among gbMSM living with HIV and assess adherence to national guidelines, as well as changes since the previous audit.

METHODS

- A retrospective audit was conducted of 70 gbMSM living with HIV attending a tertiary hospital clinic between January and December 2025.
- Data collected included HCV screening rates and the prevalence of positive sexually transmitted infection (STI) tests within the cohort.

RESULTS

- Of the 70 patients, 32 (45.7%) underwent HCV screening, representing an improvement from 27% in the previous audit.
- 31 of the 32 screens were negative for HCV (1 test not analysed due to unsuitable sample)
- The median age was 37.5 years. Of those screened, 31 tested negative for HCV and one sample was not processed.
- Overall, 54.3% of patients were not screened within the 12 month study period.
- Rates of HCV screening were higher among individuals with at least one positive STI test during the year (52%) compared to those without a positive STI result (31.8%).



DISCUSSION

- HCV screening rates among gbMSM living with HIV improved following the initial audit but remain below recommended standards.
- The findings highlight the value of audit and re-audit in promoting awareness, education, and improved clinical practice in keeping with guideline-based recommendations
- HCV screening rates were higher among higher-risk individuals (those with a positive STI test) compared with individuals who tested negative for an STI.
- However, gaps in adherence persist. Screening rates may be underestimated due to the increasing use of home-based STI testing kits, with data limited to hospital laboratory records.
- Ongoing efforts including clinician education, dissemination of audit findings, and targeted interventions in outpatient settings are required to improve compliance with national screening guidelines and optimise patient care.

REFERENCES

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- 4) European AIDS Clinical Society (EACS) Guidelines. "STI Screening and Treatment. Oct 2025. <https://eacs.sanfordguide.com/en/eacs-hiv/eacs-section4/sexual-reproductive-health/sti-screening>