

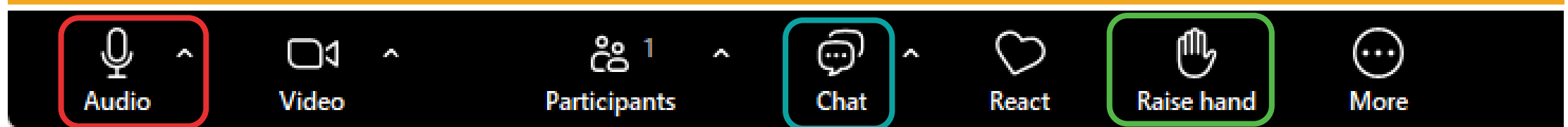
Small Steps, Big Impact: How Primary Care Can Drive Hepatitis C Elimination in Ontario

November 26, 2025



Alliance for Healthier Communities
Alliance pour des communautés en santé

Housekeeping



- You may enter questions through the **Chat** at any time.
- You may also use the **Chat** function for technical assistance.
- During the Q&A period, you may use the **Raise Hand** function.
We'll call on you and unmute your microphone.
 - *Please don't forget to mute your microphone when you're done.*

Acknowledgement of Traditional Indigenous Territories

We recognize that the work of the Alliance for Healthier Communities and Alliance members takes place across what is now called Ontario on traditional territories of the Indigenous people who have lived here since time immemorial and have deep connections to these lands. We further acknowledge that Ontario is covered by 46 treaties, agreements and land purchases, as well as unceded territories. We are grateful for the opportunity to live, meet and work on this territory.

Ontario continues to be home to vibrant, diverse Indigenous communities who have distinct and specific histories, needs, and assets, as well as constitutionally protected and treaty rights. We honour this diversity and respect the knowledge, leadership and governance frameworks within Indigenous communities. In recognition of this, we commit to building allyship relationships with First Nation, Inuit and Métis peoples in order to enhance our knowledge and appreciation of the many histories and voices within Ontario. We also commit to sharing and upholding responsibilities to all who now live on these lands, the land itself and the resources that make our lives possible.



HEPATITIS C ELIMINATION
ROADMAP ONTARIO



Small Steps, Big Impact:

How Primary Care Can Drive Hepatitis C Elimination in Ontario

Bernadette Lettner, RN

Lead, Hepatitis C Elimination:
Clinical Training, Guidance and Monitoring

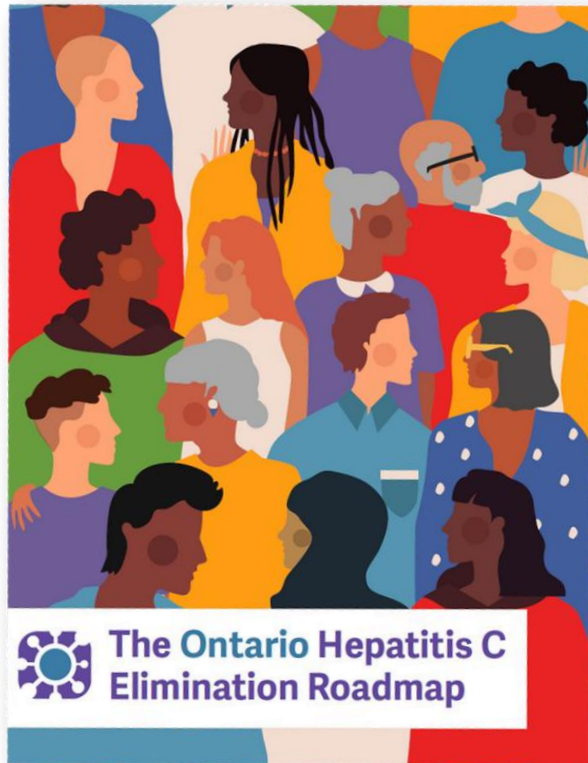
Kate Palbom

Lead, Hepatitis C Elimination:
Engagement and Secretariat

Land Acknowledgement

- I would like to acknowledge the traditional custodians of the land where I live and work
 - Mississaugas of the Credit
 - Anishnabeg
 - Chippewa
 - Haudenosaunee
 - Wendat
 - Many diverse First Nations, Inuit and Métis peoples
- Toronto is on the unceded territory of the Algonquin Anishinaabe territory
- We express our gratitude to the community and Elders past and present who have stewarded the beautiful land which we share
- We acknowledge the role that past and ongoing colonial practices have contributed to the disproportionate burden of hepatitis C among Indigenous peoples in Canada

Session Overview



- HCV and Health Equity: The Ontario Roadmap
- Hep C Elimination in Action: Wins and Tools
- Integration of HCV in Primary care
 - Screening
 - Attachment
 - Connection to Care
- Case Study
- Tools, Resources, Support

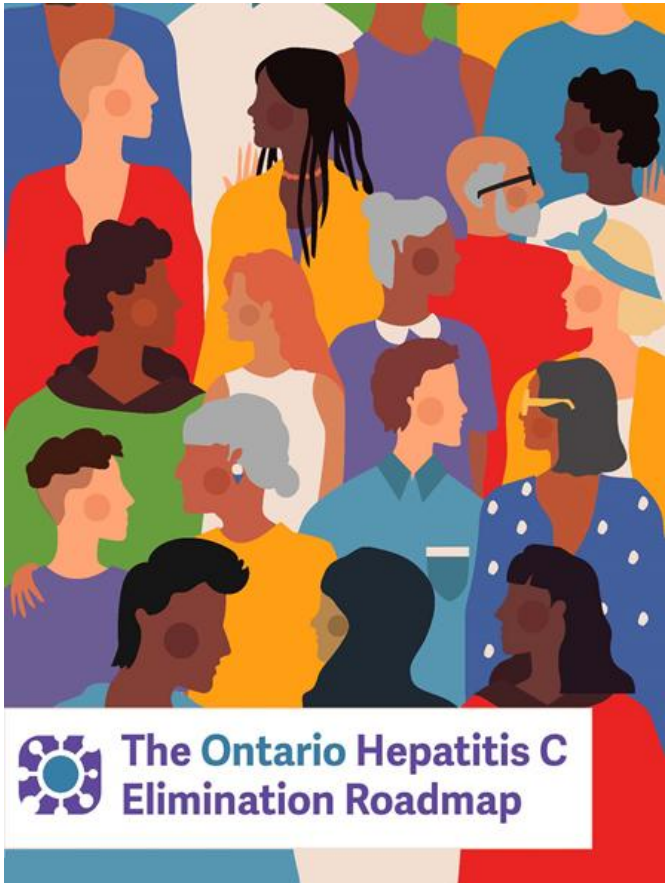
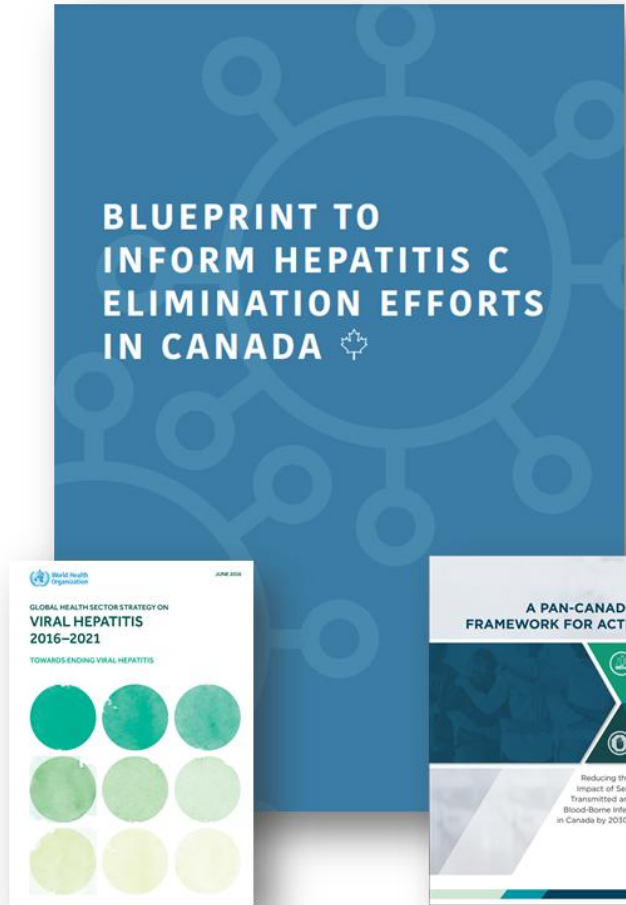


HCV and Health Equity: The Ontario Roadmap

*"HCV is the first **curable** chronic viral infection, and reaching elimination is possible, but only through collective action from the health sector."*

Hep C Elimination Roadmap

National Blueprint to Provincial Roadmap



Hepatitis C Elimination Roadmap Ontario



Reduce new infections
by **80%**



Diagnose **90%** of people
living with hepatitis C

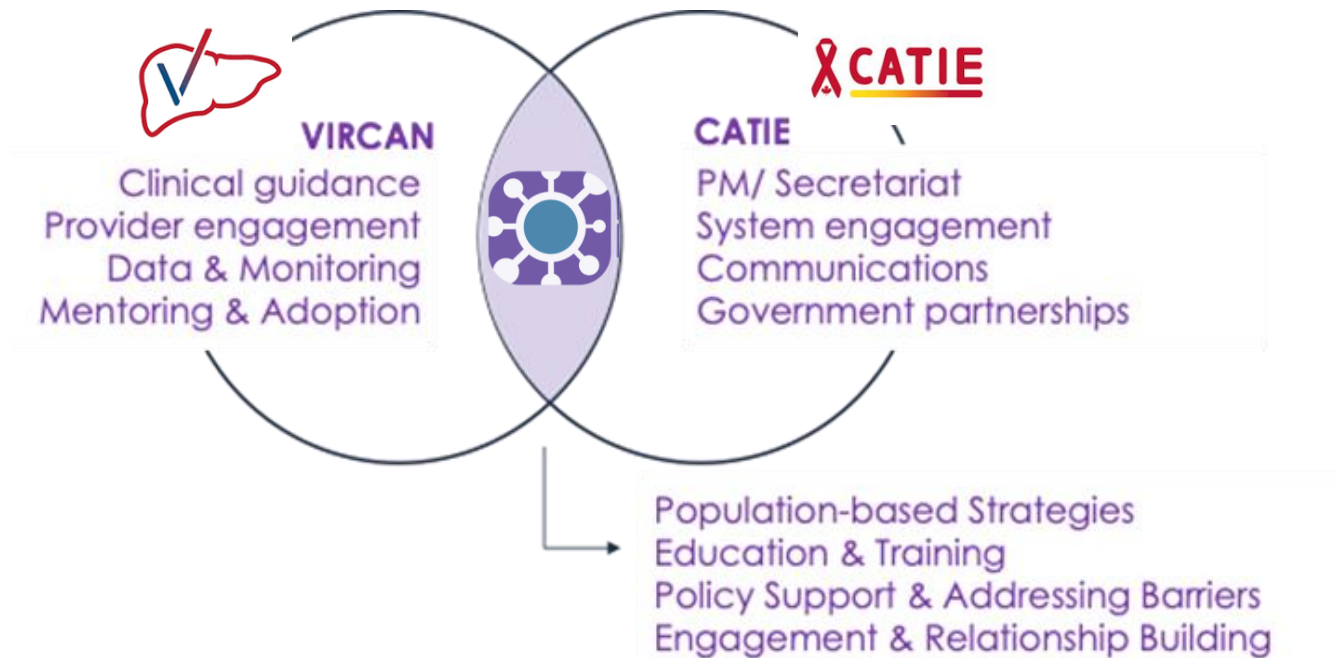


Begin treatment for **80%**
of people living with
hepatitis C

A guiding policy and practice initiative outlining how Ontario can take action to:

- Advance prevention strategies, including among those at highest risk.
- Increase the number of people tested for and diagnosed with hepatitis C.
- Expand treatment options for easier access.

The Hepatitis C Elimination Roadmap is a Co-located Initiative



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Snapshot: Hepatitis C in Ontario



Over 110,000 Ontarians are living with hepatitis C.

Hepatitis C is a leading cause of death and illness from an infectious disease.



It's estimated that 1 in 3 Ontarians are unaware of their infection.

Testing is the only way to know if you have hepatitis C.



Simple treatments cure over 95% of people.

If left untreated, hepatitis C can cause serious liver disease and liver cancer.

Opportunities: Addressing HCV

HCV elimination can demonstrate results as a provincial cancer prevention strategy. This requires support to raise awareness and to increase testing.

- Liver cancer is on the rise in Ontario, with an estimated two thirds of cases attributed to viral hepatitis (and over 50% from hepatitis C).
- People with chronic HCV are 24 times more likely to develop liver cancer
- Most HCV goes undetected for many years
- Risk factors on the rise (changing demographics; changing substance use)

Accelerating efforts to meet 2030 HCV targets will create estimated **savings of \$114.5 million.**

HCV Crosses Health Systems

Cancer screening
and prevention

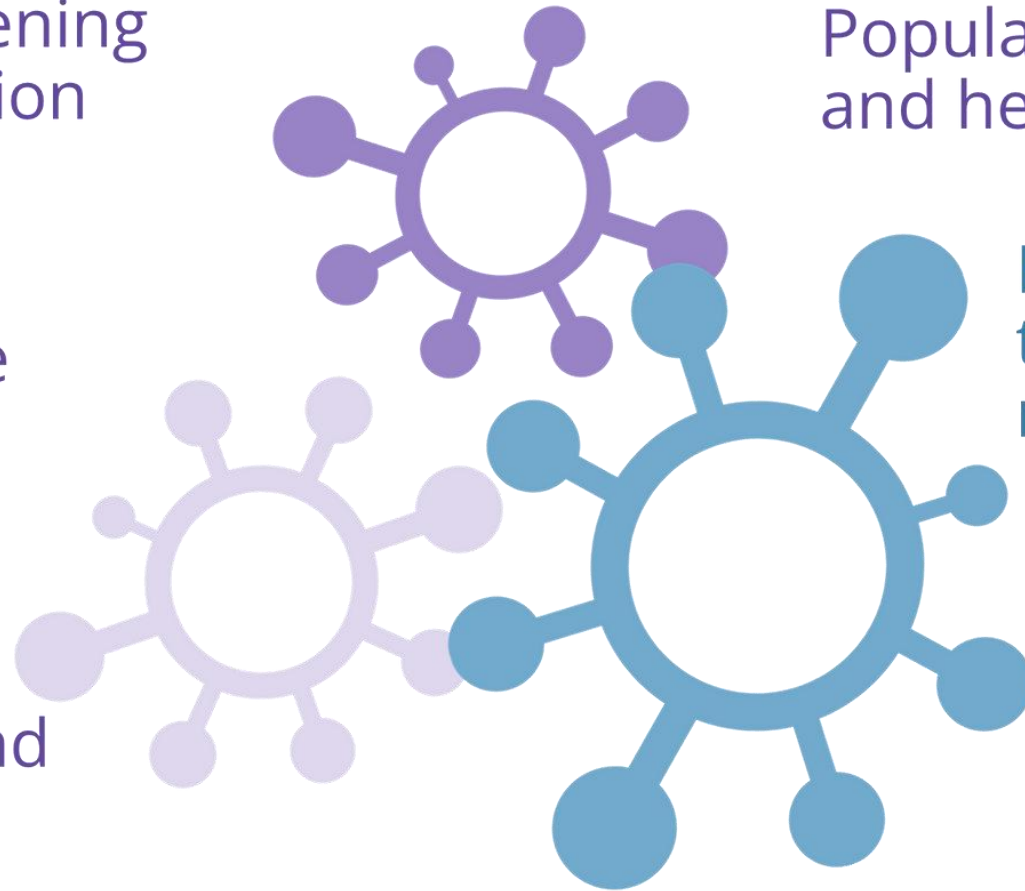
Supporting
primary care
providers

Easy access
screening and
testing

Population-based care
and health equity

Harm reduction/
toxic drug crisis
response

Standardizing care
in corrections



Priority Populations

HCV Elimination is an Equity Initiative

- 1 in 2 people who use drugs have ever had HCV
- 1 in 9 people with prison experience have ever had HCV
- 1 in 14 First Nations, Inuit and Métis Peoples have ever had HCV
- 1 in 25 gay, bisexual and other men who have sex with men have ever had HCV
- 1 in 50 immigrants and newcomers have ever had HCV

Voices of hepatitis C:

"I passed my medical when I came to Canada. I assumed I was healthy."



People who use drugs



People with prison experience



First Nations, Inuit and Métis peoples



Gay, bisexual and other men who have sex with men



Immigrants and newcomers

Equity in Action: Who must we reach?



Prioritizing Affected Populations

- Focus on groups most affected by Hepatitis C

Barriers to Healthcare

- Affected populations face stigma and discrimination at all levels: policy, systems, care provision

Tailored Strategies and Addressing Disparities

- Health equity focus
- Access to harm reduction, integration in Substance Use Health, Prison Health
- Partnering with communities and training providers

Ontario's Existing HCV Response

- Ontario Hepatitis C Teams
- Community Health Centres
- Public Health Units
- OAT/RAAM/addiction treatment
- Prisons
- VIRCAN/CATIE
- Some Primary Care Networks
- Community support programs (housing, support, mental health)
- Hospitals



Ontario Hepatitis C Teams Network

The Ontario Hepatitis C Teams were created by the Ministry of Health to support marginalized populations in Ontario who have or are at risk for hepatitis C.

Community-based, multidisciplinary teams providing low-barrier, wrap-around care for people living with or at risk for hepatitis C.

- **Clinical services** such as testing and treatment for HCV, HBV and HIV, and other primary care.
- **Psycho-social support** including counselling, mental health support, and referrals for housing and other social services.
- **Community-based work** such as outreach, education, harm reduction services and more.

Serving

- People who use substances
- **People involved in the provincial correctional system**
- People who are homeless or underhoused
- Youth who are street-involved
- Indigenous people and communities

www.ontariohep.ca





Hep C Elimination in Action: Wins and Tools

"Many advances have been made over the past few years, and more tools are available than ever to test people for HCV, particularly outside of clinical settings."

Hep C Elimination Roadmap

Hepatitis C Basics: Testing, Treatment, Prevention

Testing is the only way to know if you have hepatitis C.

- There is no vaccine for Hep C. Only for Hep B and A.
- Immigration medical exams do not screen for Hep C.
- You can feel healthy, without symptoms for years. Severe liver injury can still happen during this time and cause major health issues later on.

Treatment cures over 95% of people with hepatitis C.

- Treatment is easy and the cure is highly effective, with few side effects.
- Anybody can be cured, even if they are actively using substances.

Hepatitis C treatment is liver cancer prevention.

- HCV cure prevents liver injury and advanced liver disease, and it reduces the risk of liver failure and liver cancer.
- People with chronic hepatitis C are 24 times more likely to develop liver cancer.

Hepatitis C can be prevented.

- People can also get hepatitis C again, even if they've been cured.
- Access to new harm reduction or substance use services can prevent new cases of HCV.

Elimination Wins: Testing



Algorithm

HCV RNA viral load reflex testing will be tested for individuals with:

- A first-time HCV antibody reactive result
- A previously reactive HCV antibody with no history of HCV RNA viral load testing
- A first-time inconclusive HCV antibody



SOGC CLINICAL PRACTICE GUIDELINE · Volume 47, Issue 2, 102780, February 2025

[Download Full Issue](#)

Clinical Consensus Statement No. 458: Hepatitis C Virus in Pregnancy

[Andrea Atkinson, MBBS](#) · [Natalie Bjurman, MD](#) · [Mark Yudin, MD](#) · [Chelsea Elwood, MD](#)  

[Affiliations & Notes](#)  [Article Info](#) 

Public Health Ontario Testing

- Dried Blood Spot sampling
- HCV Reflex testing expansion:
 - First time antibody positive
 - No HCV RNA on record

Updated Recommendations: SOGC

- HCV testing in every pregnancy

POSSIBLE GAME CHANGER

Ontario Health, based on guidance from the Ontario Health Technology Advisory Committee, provisionally recommends:

“Publicly funding **one-time** hepatitis C virus (HCV) screening for all adults 18 years and older, while prioritizing HCV screening among high-risk groups.”

-Draft recommendation

[Learn more, provide feedback](#)






**Ontario
Health**

Scan Here



Treatment and Medication

- Hepatitis C can be cured using Direct-Acting Antiviral (DAA) medications.
- The cost of treatment is covered for **all** Ontarians
- Treatment is highly effective
- Anybody can be cured, treatment should be widely offered
- Medication is well tolerated
- **New: Testing and Treatment in Provincial correctional institutions**

Hepatitis C Treatment Coverage in Ontario

This document summarizes different hepatitis C treatment coverage channels in Ontario. For additional information, visit the [CATIE website](#) or the [Ontario Hepatitis C Elimination Roadmap website](#).

Scenario A: People with OHIP

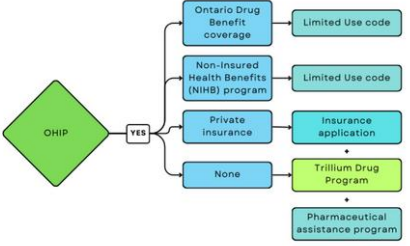
People with Ontario Drug Benefit coverage: Including people enrolled in [Ontario Works](#) or the [Ontario Disability Support Program](#), are over 65 years, or qualify for [OHIP+](#). Limited Use Code can be used ([see Ontario Drug Benefit Formulary](#)).

People with Non-insured Health Benefits (NIHB) program: If the patient is eligible for Ontario Drug Benefit, Limited Use code can be used ([see Ontario Drug Benefit Formulary](#)). Otherwise go through [Non-insured health benefits](#).

People with private insurance: Go through the private insurance first. If the full cost cannot be covered, [Trillium Drug Program](#) and [pharmaceutical assistance program](#) ([see page 2](#)) are available.

People with none of the above: Submit applications for [Trillium Drug Program](#) and [pharmaceutical assistance program](#) ([see page 2](#)).

***Reinfection treatment** can also be covered for people with OHIP. Submit an application through [Exceptional Access Program \(EAP\)](#) using a paper form, or the [web portal](#) for a quicker response.

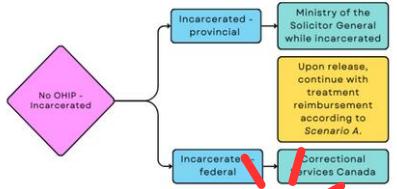


Scenario B: People Who are Incarcerated

People incarcerated in provincial institutions: The Ontario Ministry of the Solicitor General will cover treatment during incarceration and link to community treaters.

People incarcerated in federal institutions: Correctional Services Canada will cover treatment cost during incarceration.

Upon release, continue treatment according to [Scenario A](#). The Ontario Ministry of the Solicitor General will dispense medication for the remainder of the month if treatment has started during incarceration. [Pharmaceutical compassionate access](#) programs can provide bridging medication until coverage is obtained ([see page 2](#)).



Updated January 2025



Integration of HCV in Primary care

*Your practice, your patients,
your work - these are
essential elements in HCV
elimination.*

HCV Care as Routine Primary Care

OPPORTUNITIES:

Primary care is key to expanding testing and treatment. There are opportunities to promote uptake, including clinical pathways and incentives.

90% of hepatitis C cases are still overseen by a specialist, despite changes in testing and treatment

- Testing can be normalized as part of routine care; one-time screening and testing
- Modern HCV treatments are simple and highly effective; majority of patients simply require an 8-12 week course of once-a-day pills
- Programs like ECHO Liver create a pathway for providers to build confidence to treat

Primary Care: HCV Screening

- Routine screening, one-time for all
 - On attachment
 - Outreach and health fairs
- Offer annual screening for those at risk

Opportunities:

- HCV screening at Supportive Access Clinics, with facilitated attachment through OH
- Emergency department with referral to community care
- RAAM clinics
- Sexual health clinics
- Online testing requests, Like GetAKit.ca



Primary Care: Attachment

HCV screening is a tool to attach people to primary care:

- At CHCs that have HCV Teams

Co-located in high volume high prevalence harm reduction services.


HCV is an opportunity to change relationship with health care systems:

- Successful engagement to repair relationships

Rapid hepatitis C virus point-of-care RNA testing and treatment at an integrated supervised consumption service in Toronto, Canada: a prospective, observational cohort study

Bernadette Lettner,^a Kate Mason,^a Zoë R. Greenwald,^{b,c} Jennifer Broad,^a Erin Mandel,^d Jordan J. Feld,^d and Jeff Powis^{c,*}

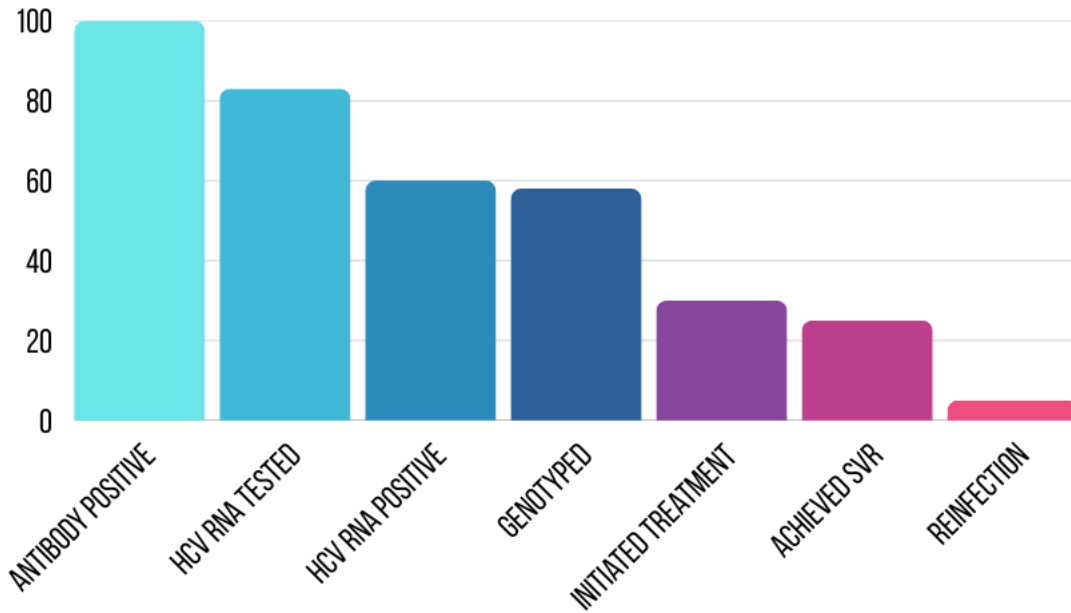
CANADIAN
Liver Journal

► Can Liver J. 2023 Feb 28;6(1):46–55. doi: [10.3138/canlivj-2022-0011](https://doi.org/10.3138/canlivj-2022-0011) 

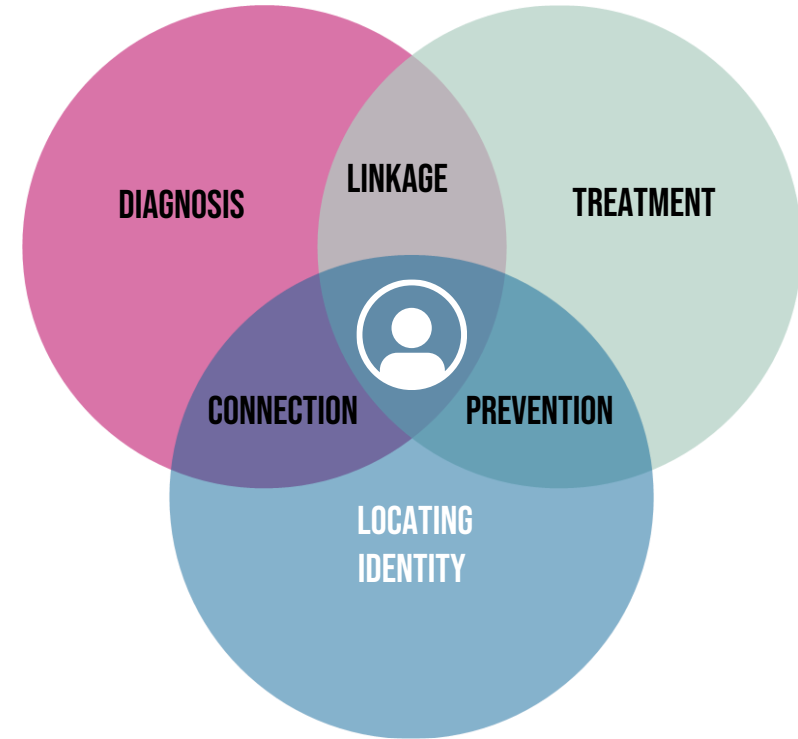
Lessons from First Nations partnerships in hepatitis C research and the co-creation of knowledge

[Andrew B Mendlowitz](#)^{1,2,✉}, [Karen E Bremner](#)², [Jordan J Feld](#)¹, [Lyndia Jones](#)³, [Evelynne Hill](#)³, [Elly Antone](#)³, [Laura Liberty](#)³, [Rene Boucher](#)³, [Murray D Krahn](#)^{2,†}

Primary Care: Connection to Cure



Support the entire cascade.



Connect people with HCV to a cure.



Hepatitis C - Case Study

Case Study: Parvin

Parvin is a 58 year old man from Pakistan.

He came to Canada 15 years ago and has been working in the textile industry.

He has diabetes, which is managed with Lantus and oral metformin.

His BMI indicates he is overweight, and his blood sugars sit within high normal ranges.

You meet with him for his annual check up.

He reports to you that he has been feeling more fatigued of late, and wonders if this might be a result of long COVID.



Polling Question

Do you routinely test for HCV in your practice?

Case Study: Parvin

You recall the recommendation for HCV screening in **newcomers**, particularly those who were born, travelled, or lived in a region where hepatitis C is common.

You ask Parvin about HCV screening. He mentions he doesn't remember being screened, but does recall an episode of **acute hepatitis** for which he was hospitalized in India:

"I was in an accident on the road, and had a **blood transfusion**. I was just a teenager at the time. They had to keep me for a while because my **liver was suffering**. But it all cleared up and I **haven't had any issues since**."

Voices of hepatitis C:

"I passed my medical when I came to Canada. I assumed I was healthy."

Polling Question

Do you currently engage patients in conversations around recommendations for hepatitis C screening?

Case Study: Parvin

You decide to add an HCV antibody test to Parvin's routine blood work.

A week later, you receive a report from **Public Health:**

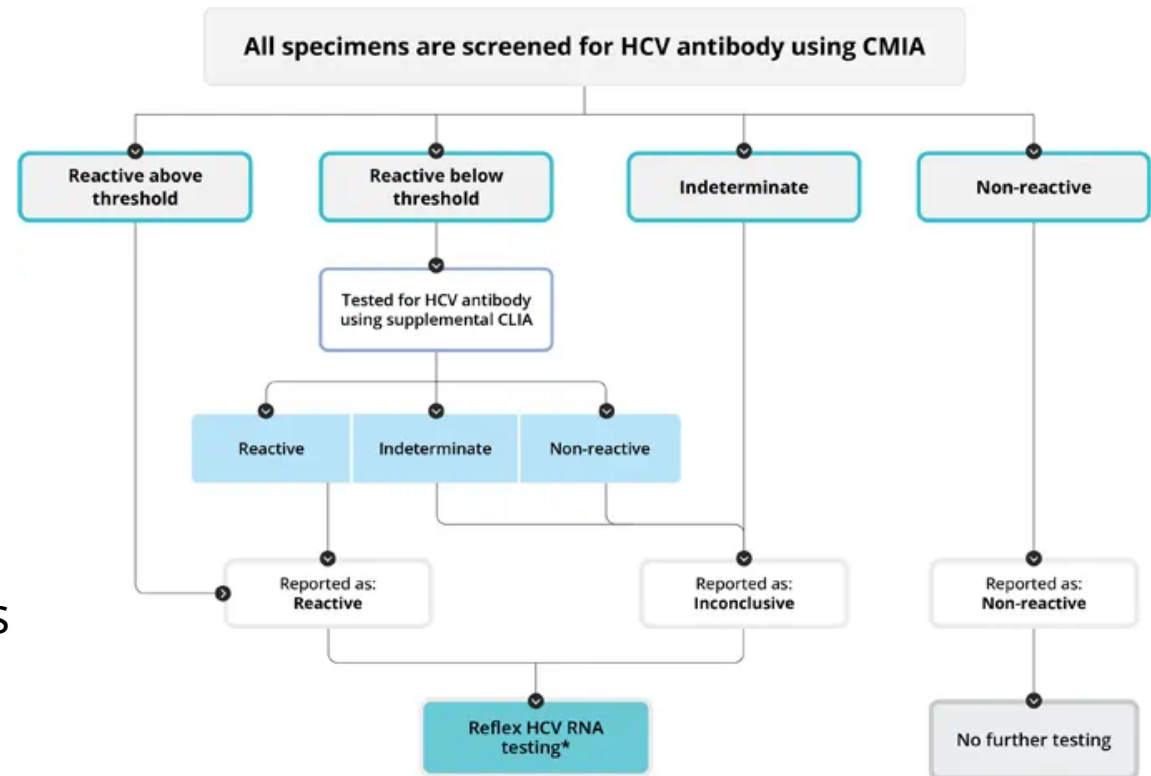
- Hepatitis C antibody reactive.

Following this is a note:

- First time antibody reactive samples are automatically tested for HCV RNA; results pending.

Three days later, another report arrives:

- HCV viral load detected, 1.03 E^6
- Genotype 3



*Reflex HCV RNA viral load testing performed for individuals who have:

- A first-time reactive HCV antibody test
- A previously reactive HCV antibody but no HCV RNA viral load testing on record
- A first-time inconclusive HCV antibody test

Polling Question

Have you ever treated or referred someone for
HCV treatment?

Case Study: Parvin

Parvin has attended your practice for 10 years now, and you are confident in his connection to you and your practice setting.

After completing an education course on HCV Treatment in Primary Care, you feel prepared to start him on treatment.

The course alerted you of the need to monitor blood sugar, particularly in people with genotype 3, as hypoglycemia can occur during and following treatment.

He successfully completes his treatment.

You draw blood work for HCV RNA 12 weeks after his treatment is complete and send it off to Public Health to process.

The result:

- HCV viral load not detected

Voices of hepatitis C:

"I knew my status for almost 10 years before I got treatment. I didn't want to face my doctor. I still feel like people look at me differently."

Polling Question

Do you feel confident in address hepatitis C
(testing, counselling, treating or referring) in your
practice?



Tools, Resources and Support

One-Stop-Shop Hep C Elimination Website

- Upcoming launch of expanded www.EndHepC.ca website.
- A single source for information for both the public and providers that allows people to self-refer for testing or treatment and for providers to be linked with clinical support.

HEPATITIS C ELIMINATION ROADMAP ONTARIO

Search

Get Care For Care Providers Hepatitis C Basics News and Events About Quick Exit

Curing hepatitis C is simple.

Everyone can get tested. Get treated, get cured.

Get tested Learn about Hepatitis C

COMING SOON!

Get Tested

Getting tested is the only way to know if you have hepatitis C. If you've never been tested for hepatitis C, now is a good time to check!

Learn more about testing

Connect to Cure

Treatment is simple, everyone can be cured from hepatitis C.

Learn more about treatment

Learn

Hepatitis C is an infection in the liver caused by the hepatitis C virus.

Learn More About Hep C

About hepatitis C

Hepatitis C is a viral infection that affects the liver. It can cause liver inflammation and, over time, liver injury or damage.

Many have no symptoms and don't know they are living with hepatitis C. Getting tested and treated is important. Most people can be cured with just a few months of medication. If left untreated, hepatitis C can lead to serious liver damage, including liver failure. Everyone has a part to play in eliminating hepatitis C in Ontario.

It's never too late to get tested or treated for hepatitis C.

Stay informed about Ontario's plan to end Hep C

Enter your email Sign Up

By clicking Sign Up you're confirming that you agree with our Terms and Conditions

HEPATITIS C ELIMINATION ROADMAP ONTARIO www.endhepc.ca

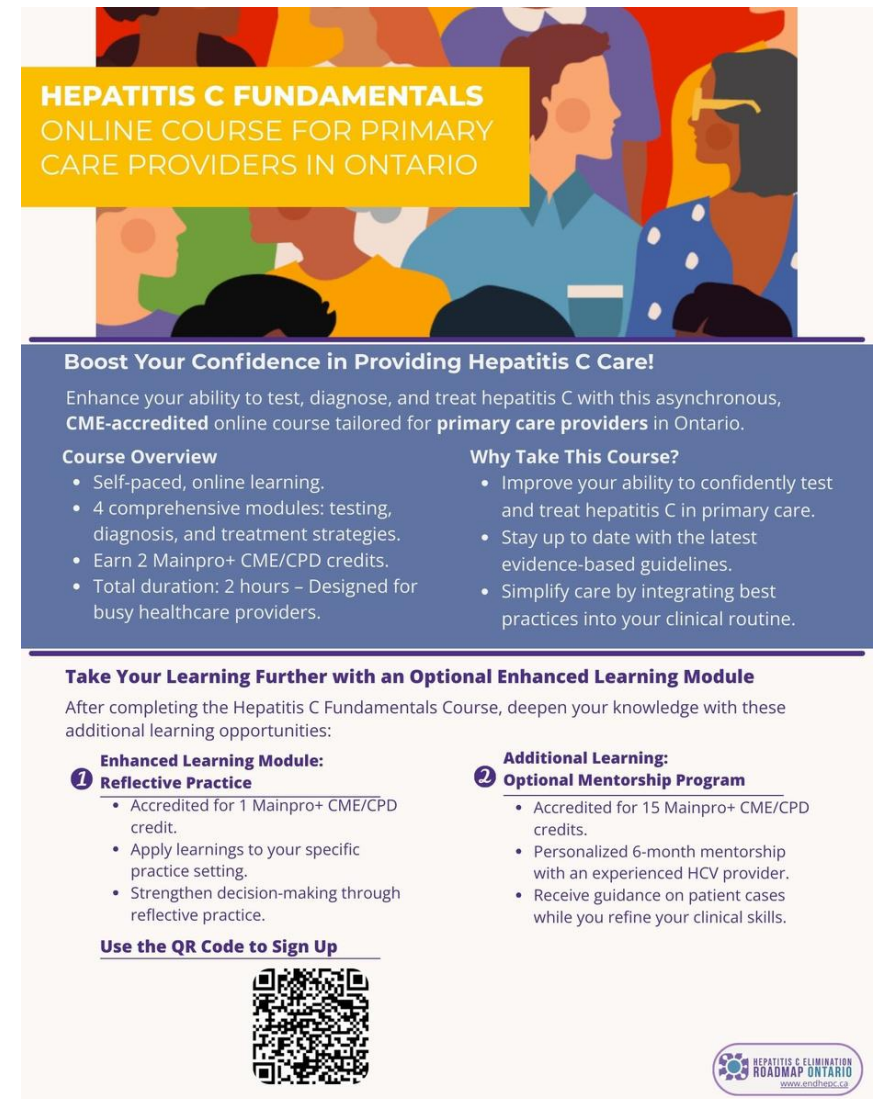
Expanding the Hep C Response

How we're building capacity

- Expanded HCV training programs and virtual support networks.
- Building a suite of EMR-optimization tools for primary care
- More providers delivering care with decreased time to treatment start.

Optimizing OCEAN Referral Platform (coming soon)

- Provider referral
- Self-referral
- Pathways for testing and treatment
- HCV now, HBV option built-in



HEPATITIS C FUNDAMENTALS
ONLINE COURSE FOR PRIMARY CARE PROVIDERS IN ONTARIO

Boost Your Confidence in Providing Hepatitis C Care!

Enhance your ability to test, diagnose, and treat hepatitis C with this asynchronous, **CME-accredited** online course tailored for **primary care providers** in Ontario.

Course Overview

- Self-paced, online learning.
- 4 comprehensive modules: testing, diagnosis, and treatment strategies.
- Earn 2 Mainpro+ CME/CPD credits.
- Total duration: 2 hours – Designed for busy healthcare providers.

Why Take This Course?

- Improve your ability to confidently test and treat hepatitis C in primary care.
- Stay up to date with the latest evidence-based guidelines.
- Simplify care by integrating best practices into your clinical routine.

Take Your Learning Further with an Optional Enhanced Learning Module

After completing the Hepatitis C Fundamentals Course, deepen your knowledge with these additional learning opportunities:


1 Enhanced Learning Module: Reflective Practice

- Accredited for 1 Mainpro+ CME/CPD credit.
- Apply learnings to your specific practice setting.
- Strengthen decision-making through reflective practice.

2 Additional Learning: Optional Mentorship Program

- Accredited for 15 Mainpro+ CME/CPD credits.
- Personalized 6-month mentorship with an experienced HCV provider.
- Receive guidance on patient cases while you refine your clinical skills.

Use the QR Code to Sign Up



HEPATITIS C ELIMINATION ROADMAP ONTARIO
www.erdhpc.ca

How the Roadmap Can Help You



- Developing processes and connections
- Training and education resources for clinical and community care providers
- Clinical practice tools
- Education and knowledge building content
- Integrating hepatitis C into your work/workflows
- Big scary ideas and questions

Bernadette Lettner, RN

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Guidance and Monitoring

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Kate Palbom

Lead, Hepatitis C Elimination: Engagement and
Secretariat

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Thank you.

The Ontario Hepatitis C Elimination Roadmap is supported by the Ontario Ministry of Health.
The Roadmap is co-led and co-implemented by VIRCAN and CATIE.