P-58 PREVALENCE OF CHRONIC VIRAL HEPATITIS TYPE C IN PEOPLE DEPRIVED OF THEIR LIBERTY IN THE CERESOS OF THE STATE OF VERACRUZ, MEXICO: TOWARDS MICRO-ELIMINATION

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Introduction and Objectives: By the finally of the WHO Strategy for the control and elimination of Chronic Viral Hepatitis Type C (HCV) by 2030, persons deprived of their liberty (PPL) are a key population due to the high prevalence reported in prisons. This study aimed to determine the prevalence of HCV of PPL in the 17 Social Rehabilitation Centers (CERESO's) of the State to treat with Direct Action Antivirals (DAA) and to identify the risk factors in this population.

Patients and Methods: Descriptive, cross-sectional, observational study in 17 CERESO from Veracruz, Mexico, to 6466 PPL, through screening from 2019 to the present. APRI/FIB4 index, glomerular filtration rate, HIV, comorbidities, and related risk factors were determined. Post-screening, 31 patients were treated with DAAs with sofosbuvir/velpatasbir and 5 with glecaprevir/pibrentasvir with sustained viral response in all patients.

Results: An incidence of HCV in PPL of 0.6% (36 patients) was found, with a prevalence of 0.05% (4 patients) to date, which have already received treatment with DAAs. 100% were men without HIV. As risk factors, 69% of the PPL used intranasal or intravenous psychoactive substances (UDIS), and 61% had piercings and/or tattoos. 80.6% did not have a school education or did not mention it, and only 14% had completed primary school. The population with the highest risk was between 30 and 39 years old (49%). Determined APRI/FIB-4, only 5 patients were staged F3 and 1 F4.

Conclusions: The prevalence of HCV in PPL in CERESOs of Veracruz, Mexico, is lower than that reported in the world literature, which is explained by the consumption of only 0.4% of UDIS, which stands as the main risk factor for prevalence. In previous reports, the majority of the population are men within the age group of 30 to 39 years, lower than previously found.

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P-60 DETERMINATION OF THE PREVALENCE OF HEPATITIS C VIRUS USING THE RAPID MONTEBIO HCV TEST IN A HIGH-RISK POPULATION OF HOSPITAL DEL SALVADOR, CHILE.

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Introduction and Objectives: There are 71 million infected in the world and approximately 4 million in Latin America. In Chile, it is estimated that there are approximately 35-50 thousand infected, of which less than 10% have been identified and treated. This study aimed to determine the prevalence of anti-HCV in patients at high risk of infection using a rapid test for HCV.

Materials and Methods: Cross-sectional and descriptive study, which examined 502 samples of capillary blood from patients of the Hospital del Salvador, based on risk factors for Hepatitis C. The commercial Montebio HCV test was used, which reports a sensitivity and specificity of 99%.

Results: Of the total of 502 samples, 52.9% (266) corresponded to women. The average age was 51.5 years; the main risk factor was being older than 45 years (45.8%, 230/502), followed by being exposed to health personnel (34.5%, 173/502). 99.4% of the tests were validly performed. The positivity was 0.59% (3/502).

Conclusions: The implementation of a rapid test as screening is a useful and cost-effective tool in populations with risk factors. In the population studied, there is a higher prevalence than that reported in other series.

Table 1. Positive results distributed by sex, age and risk factor.

Risk factors	Result	Sex	Age	Total
Liver cirrhosis from alcohol	Positive	M	58	1
Over 45 years old	Positive	F	74	1
Blood transfusions from before 1996	Positive	F	75	1
Total general				3

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P-61 PREVALENCE OF HEPATITIS E VIRUS INFECTION ON CIRRHOTIC PATIENT POPULATION FROM ROSARIO

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Introduction and Objectives: Hepatitis E virus (HEV), with the zoonotic transmission, is one of the main agents causing acute hepatitis. In individuals with chronic liver disease, the infection can cause acute on chronic liver disease (ACLD) and can lead to fulminant liver failure. This study aimed to analyze the impact of HEV infection in a cohort of cirrhotic individuals from Rosario, Santa Fe.

Materials and Methods: Ninety-seven individuals (18-82 years old; male=61) with liver cirrhosis of different etiology were enrolled; among them, 57 were followed up over two years. Blood samples were obtained every six months and at the time of decompensation of the cirrhosis. IgG and IgM a-HEV were studied by ELISA and HEV RNA by RT-qPCR method optimized in our laboratory. As a control group, 154 blood donors (18-62 years old; male=90) were analyzed.

Results: We demonstrated a seroprevalence of IgG a-HEV of 5.2% (5/97) in the cirrhotic population, compared to 3.2% obtained in the control group ($p>0.05$). The highest prevalence of IgG a-HEV was recorded in those cirrhotic patients with autoimmune and hepatitis C infection etiology (11.1% and 8.0%, respectively). Among the 57