

# PEER-ASSISTED TELEMEDICINE FOR HEPATITIS C IS MORE EFFECTIVE IN THOSE WITH UNSTABLE HOUSING: SECONDARY OUTCOMES OF A RANDOMIZED CONTROLLED TRIAL.

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## Background:

Unstable housing is associated with lower odds of HCV treatment and cure in global meta-analyses. We examined the effect of housing on HCV viral clearance within a randomized trial comparing peer-assisted telemedicine for HCV treatment (TeleHCV) versus peer-assisted usual care in rural people who use drugs (PWUD). We hypothesize that housing moderated the effect of TeleHCV.

## Methods:

Poisson regression with robust standard error estimation was utilized with HCV viral clearance as the outcome, treatment assignment as the exposure, and housing status the effect modifier of interest. Unstable housing was defined as participant self-report at baseline of any experiences of homelessness in the past 6 months. HCV viral clearance was defined as a sustained virologic response 12 weeks after last dose of medication in those who initiated treatment and undetectable HCV RNA 9 months post-randomization in those who never started treatment.

## Results:

141 of 203 participants were unstably housed. Viral clearance was less likely among participants with unstable housing; 48/141 (34%) among unstably housed vs. 31/62 (50%) among stably housed participants (RR = 0.68, 0.49-0.96,  $p = .026$ ). Among TeleHCV participants, unstably housed participants were more likely to attain viral clearance compared to stably housed participants ( $p$  for interaction between treatment assignment and housing status = .022). Unstably housed participants assigned to the TeleHCV arm were more likely to attain viral clearance compared to those in the usual care arm (RR = 6.47, 3.12–13.43,  $p < .001$ ). Stably housed participants assigned to TeleHCV were also more likely to achieve HCV viral clearance (RR = 2.15, 1.19–3.89,  $p = .012$ ).

## Conclusion:

Unstable housing moderated the effect of TeleHCV in achieving HCV viral clearance. TeleHCV was approximately three times more effective at increasing the rate of HCV viral clearance among unstably housed participants than housed participants.

## Disclosure of Interest Statement: