

HIGHLY EFFECTIVE HCV-THERAPY AND LOW RATE OF REINFECTION IN PERSONS WHO INJECT DRUGS AND RECEIVE OPIOID AGONIST THERAPY.

Authors: Schubert R¹, Schütz A¹, Schwanke C¹, Luhn J¹, Moser S², Gutic E², Haltmayer H¹, Gschwantler M².

¹Suchthilfe Wien gGmbH, Ambulatorium Suchthilfe Wien and ²Wilhelminenspital, Department of Internal Medicine IV, Vienna, Austria.

Background:

An important subgroup of people who inject drugs (PWID) receives opioid agonist therapy (OAT) under direct observation of a physician or nurse at a low-threshold drug treatment facility or pharmacy on a daily basis. Many of these patients are reluctant or unable to go to specialized hepatitis centers. Our hypothesis was that chronic hepatitis C in these difficult-to-treat patients could be optimally managed if antiviral treatment was applied together with OAT as directly observed therapy.

Methods:

103 PWID with chronic hepatitis C and borderline compliance (male/female: 78/25; mean age: 39.5 ± 9.2 years; genotype (GT) 1/2/3/4: 70/2/28/2; one patient was coinfecting with GT3a/4) started interferon-free treatment of chronic hepatitis C at the “Ambulatorium Suchthilfe Wien” – a low-threshold drug treatment facility in Vienna, Austria. Seven patients were coinfecting with HIV and 25 had liver cirrhosis. Patients received antiviral treatment together with OAT under direct observation of a physician or nurse.

Results:

Following this concept of directly observed therapy, adherence to antiviral therapy was excellent: Only 10/7550 scheduled dates (0.1%) for ingestion of the antiviral therapy in combination with OAT were missed by the 103 patients. Till now, 71 patients have completed treatment and a 12-week follow-up period. Virologic healing of hepatitis C infection (sustained virologic response, SVR12) could be confirmed in all 71 patients (SVR12 rate: 100%). 62 patients have completed 24 weeks of follow-up: There were two reinfections (SVR24-rate: 97%).

Conclusion:

Directly observed therapy of chronic hepatitis C with interferon-free all-oral regimens at a low-threshold drug treatment facility represents a promising new concept for treatment of patients with borderline compliance receiving OST. By this concept chronic hepatitis C can be cured in a group of difficult-to-treat patients, who are unable to be treated at hepatologic centers. The rate of reinfection was low.

Disclosure of Interest Statement:

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