



PATTERNS OF DRUG AND ALCOHOL USE AND INJECTION RISK BEHAVIOURS AMONG PEOPLE WHO INJECT DRUGS DURING AND FOLLOWING HCV DIRECT-ACTING ANTIVIRAL TREATMENT: THE SIMPLIFY AND D3FEAT STUDIES

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Disclosures

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Background

- DAA-based therapy is effective in people who inject drugs¹⁻¹⁷ and should be offered to all, irrespective of ongoing drug use
- It is unclear if DAA-based HCV treatment has an impact on patterns of drug and alcohol use and injecting risk
 - Useful to inform the development of **additional interventions/support services** to be offered alongside HCV treatment and/or to help prevent reinfection

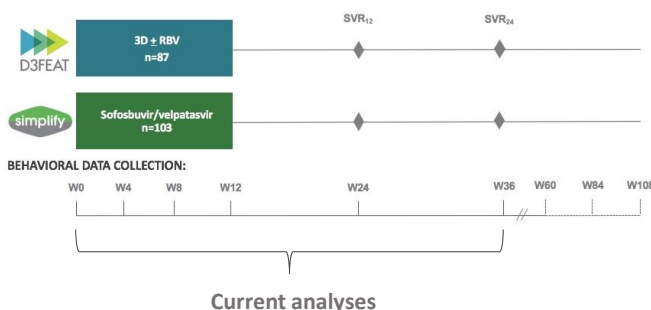
OBJECTIVE: To investigate patterns of drug and alcohol use, and injecting risk behaviours during and following DAA-based HCV treatment among people who inject drugs who are actively injecting or receiving opioid agonist treatment (OAT)

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Methods

- **Design:** Pooled analysis of 2 international, single-arm, open-label trials: SIMPLIFY and D3FEAT (25 sites, 7 countries)
- **SIMPLIFY and D3FEAT aims:**
 - **Primary:** To evaluate the efficacy of DAA-based therapy among people with recent injection drug use (last six months) or receiving OAT
 - **Secondary:** Several, including the evaluation of drug-related behaviours during and following treatment

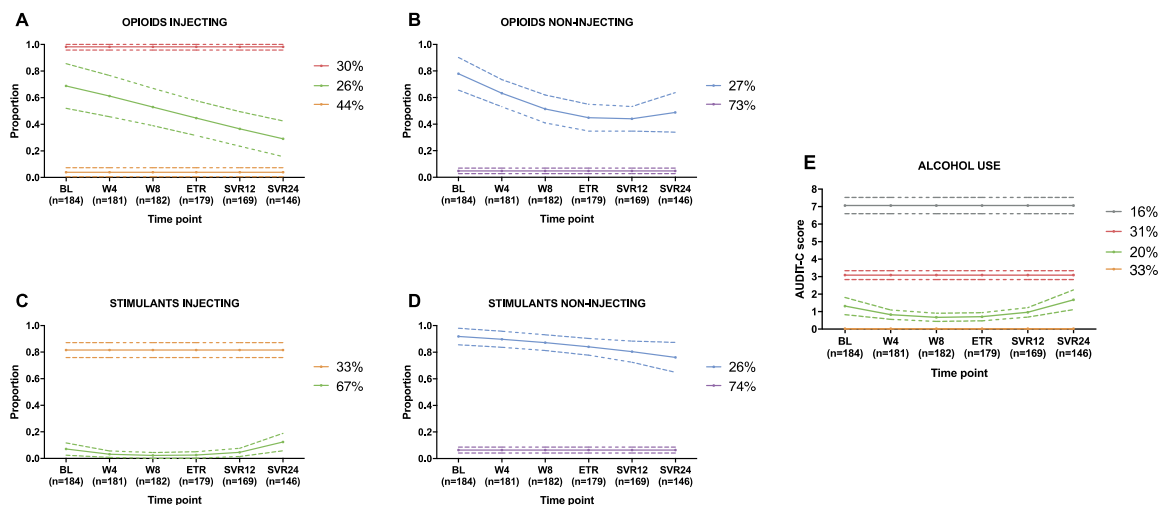


- **Statistical analyses:** Group-based trajectory modelling
 - Method that identifies groups of individuals who share a similar trajectory pattern over time with respect to a variable of interest



Results

TRAJECTORIES OF DRUG AND ALCOHOL USE OVER TIME



Hazardous alcohol use defined based on the AUDIT-C Test (range: 0-12): ≥ 3 if female and ≥ 4 if male



Conclusion and implications

- For the most part, drug and alcohol use patterns remained stable during follow-up
- Some decreases in opioid use over time were noted, particularly for opioid injection
- Injecting risk behaviours decreased during follow-up; baseline prevalence was low
- Alcohol use may need particular attention among people receiving HCV treatment

FUTURE DIRECTIONS:

- Evaluate behavioural patterns up to 2 years of follow-up
- Evaluate factors associated with specific drug use patterns



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SIMPLIFY/D3FEAT NETWORK

- **Protocol Steering Committee** – Gregory Dore (Chair, UNSW Sydney, Sydney, Australia), Philip Bruggmann (Arud Centres for Addiction Medicine, Zurich, Switzerland), Jason Grebely (UNSW Sydney, Sydney, Australia), Philippa Marks (UNSW Sydney, Sydney, Australia), Julie Bruneau (Centre Hospitalier de l'Université de Montréal, Canada), Tracy Swan (Médecins Sans Frontières, New York, United States), Olav Dalgard (Akershus University Hospital, Oslo, Norway), Jude Byrne (Australian Injecting & Illicit Drug Users League), Melanie Lacalamita (Poliklinik für Infektiologie, Inselspital, Bern, Switzerland) and Adrian Dunlop (Newcastle Pharmacotherapy Service, Newcastle, Australia)
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