

**Hepatitis C treatment in community pharmacies:
An effective way of ensuring excellent SVR rates in people on opiate
substitution therapy.**

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Disclosures


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Background/aims

- With the introduction of interferon free direct acting antivirals (DAAs) for hepatitis C, the need for regular hospital visits to monitor side effects and adverse blood results has reduced.
 - There is concern that less hospital visits reduce the opportunity to monitor compliance.
 - In our centre all DAAs medication is now supplied via a community pharmacy rather than via the specialist service within the clinic setting.
 - Patients on opiate substitution therapy are given HCV treatment (daily, weekly) at the same time
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Methods

- The study aimed to monitor treatment completion rates and outcomes in all individuals receiving oral treatments comparing patients on opiate substitution therapy (OST) to non OST patients.
 - The study was carried out between April 2015 and December 2016
 - A total of 195 were included in the study. Cohort A (97) had treatment dispensed daily in a community pharmacy with their OST. Cohort B (98) the control group were dispensed weekly or 4 weekly.
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Results

- In cohort A, 75 (77.3%) were genotype 1, 33 (34%) had cirrhosis, 14 (14.4%) were previous treatment failures.
 - In cohort B, 81 (82.6%) were genotype 1, 29 (29.5%) had cirrhosis and 29 (29.5%) were past treatment failures.
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Results (cont'd)

- 93 (96%) in cohort A completed full course of treatment and 97 (99%) in cohort B.
 - To date SVR results were available in 171 patients.
 - 75/82 (91.4%) in cohort A and 81/89 (91%) in cohort B achieved an SVR.
 - There were 5 deaths, 3 from decompensating cirrhosis and 2 for accidental overdose.
 - The main treatment failures were in genotype 3 cirrhotics
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Conclusions/implications

- In this study completion of therapy was excellent in both cohorts. Dispensing treatment daily at the same time as OST is an effective way of achieving high SVR rates.
 - Routine provision of HCV treatment does not need to be provided within specialist service. This could have a significant impact when deciding in which care settings treatment can be provided.
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 - Any questions?
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