Addiction Specialists List Barriers to HCV Treatment

By modifying these barriers, clinicians hope to treat more hep C among patients undergoing opioid addiction treatment.

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Medical providers who care for those taking opioid agonist therapy (OAT) for addiction to drugs such as heroin and prescription painkillers, say numerous barriers impede the treatment of hepatitis C virus (HCV).

Researchers conducted a survey of some 200 health care providers practicing at clinics that provide OAT in various Western nations.

The respondents identified a number of health-care-system-based barriers, including a lack of funding for noninvasive liver disease testing, long wait times to see a hep C specialist, lack of funding for HCV medications and a required period of substance-use abstinence for access to treatment.

As for barriers in their own clinics, the clinicians identified the need for an off-site referral for a liver disease assessment and treatment, a lack of peer-support programs and a lack of case managers or coordinators to link patients to necessary health care options.

Patient-based barriers identified included patients' difficulties in navigating the health care system, patients not making referral appointments and patients' fear of side effects and lack of motivation to receive treatment.

"Medical providers [who work with people who inject drugs] need to learn how to diagnose and treat hepatitis C and motivate their patients in order to reduce HCV-related mortality," says the study's lead author, Sheldon Litwin, MD, vice chair of academics and research in the department of medicine at Greenville Health System in North Carolina.

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