Injection Drug Users Can Do Well on Hepatitis C Treatment

Eighty-five percent of IDUs receiving hep C therapy at a New York City syringe exchange program were cured.

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Providing injection drug users (IDUs) with hepatitis C virus (HCV) treatment at a syringe exchange program can result in a high cure rate.

Researchers enrolled 45 IDUs attending a New York City syringe exchange program into a hep C treatment program. They presented their findings at the 2017 Conference on Retroviruses and Opportunistic Infections (CROI) in Seattle.

The study participants had an average age of 45.9. Ninety-two percent were men, 46 percent were homeless and all had active Medicaid coverage or were eligible for Medicaid. They injected drugs a median 25 times per month, ranging between four and 150 times per month. They had been injecting drugs for a median 19.3 years. Fifty-eight percent were receiving opioid substitution therapy. Nineteen percent had advanced fibrosis or cirrhosis of the liver. None had HIV.

Ninety-six percent received a Sovaldi (sofosbuvir)-based regimen, including Harvoni (ledipasvir/sofosbuvir) as well as Sovaldi paired with Olysio, ribavirin or Daklinza (daclatasvir). One person was treated with Viekira Pak (ombitasvir/paritaprevir/ritonavir; dasabuvir) plus ribavirin.

Thirty-four of the IDUs had prior authorization requests sent to Medicaid for coverage of hep C treatment. Twenty-six ultimately started treatment. Twenty-two of them (85 percent) achieved a sustained virologic response 12 weeks after completing therapy (SVR12, considered a cure).

One person did not complete treatment after experiencing adverse health events, and another did not finish treatment because of lapsed insurance. Two people did complete treatment but could not be pronounced cured because they were both reinfected, one within four weeks and the other within six weeks.

The researchers concluded that the needle exchange program provided “a convenient and safe venue to engage HCV-infected individuals who are continuing to inject.”

To read the conference abstract, click here.

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