Intervention Can Reduce Alcohol Use Among People With Hepatitis C

Experts recommend that people with hep C abstain from alcohol use, or at least cut down as much as possible.

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A group of people with hepatitis C virus (HCV) responded well to an intervention meant to reduce their alcohol use in a recent randomized study.

Because alcohol can exacerbate the liver damage caused by the virus, experts recommend that people with hep C drink no alcohol, or at least cut down as much as possible.

Publishing their findings in the journal Hepatology, a research team led by Rae Jean Proeschold-Bell, PhD, of the Duke Global Health Institute in North Carolina, recruited 181 people with HCV between October 2014 and September 2017.

The participants were randomly assigned to receive an alcohol-reduction intervention called Screening, Brief Intervention and Referral to Treatment (SBIRT), which included motivational interviewing counseling and a referral for outside alcohol treatment (95 participants), or to receive SBIRT and alcohol therapy provided on-site (86 participants). The first group was known as the SBIRT-only group; the second was known as the SBIRT + Alcohol Treatment group.

The average time spent in therapy for alcohol use over six months was 8.8 hours in the SBIRT-only group and 10.1 hours in the SBIRT + Alcohol Treatment group.

Between the study's outset and the 12-month mark, the proportion of participants who were fully abstinent from alcohol increased from 7.1% to 20.5% in the SBIRT-only group and from 4.2% to 23.3% in the SBIRT + Alcohol Treatment group. The difference between these pairs of figures was not statistically significant, meaning it could have been driven by chance.

Between the baseline point and the six-month mark, the proportion of participants reporting heavy drinking (also known as binge drinking) during the previous three months decreased from 87.5% to 26.7% in the SBIRT-only group and from 85.7% to 42.1% in the SBIRT + Alcohol Treatment group. Again, the difference between these pairs of figures was not statistically significant.

Between the study's launch and the six- and 12-month marks, both study groups reduced their

average grams of alcohol consumed per week.

“Patients with current or prior HCV infection will engage in alcohol treatment when encouraged by liver medical providers,” the study authors concluded. “Liver clinics should consider implementing provider-delivered SBIRT and tailored alcohol treatment referrals as part of standard of care.”

To read the study abstract, click here.

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