On-Site Hepatitis C Care at Opioid Treatment Programs Improved Health Outcomes

Integrating hep C testing and treatment could transform access to curative HCV treatment.

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A study published in The Lancet compared on-site hepatitis C virus (HCV) testing and treatment to off-site HCV care for people in opioid treatment programs (OTPs). Patients who received treatment with peer support on-site had more than a fourfold higher treatment initiation and higher cure rates than those referred to off-site specialists.

"These findings support policy reform and expanded resources to support HCV treatment integration into OTPs to advance progress toward HCV elimination," wrote the study's authors.

HCV is transmitted via direct blood-to-blood contact, such as through blood transfusion, childbirth or sharing used needles. If left untreated, hep C can lead to serious liver complications, including cirrhosis and liver cancer. There is no vaccine for HCV, but direct-acting antiviral therapy cures chronic hep C in more than 95% of people who complete treatment, which typically takes two or three months.

To learn more about HCV, check out Hep's Hepatitis C Basics.

The researchers used data from five participating OTP facilities in Baltimore, San Francisco, Toronto and Birmingham, Alabama. A total of 122 people with HCV were treated on-site with peer-support or referred to off-site specialty care.

Those treated on-site were assigned a trained peer mentor. OTP nurses and a nurse practitioner or physician assistant evaluated patients and prescribed medications at their discretion. Peer mentors met with patients weekly for over 12 weeks. Patients referred to off-site care were given contact information to schedule their own appointments.

“OTPs are uniquely positioned to meet the needs of people who use drugs, many of whom have multiple social disadvantages that may make it challenging to navigate the complexities of a fragmented health care system,” wrote the study’s authors.

Overall, 89% of people in the on-site care group initiated HCV treatment within 12 weeks, 64% completed treatment and 61% maintained an undetectable viral load three months after treatment, known as a sustained virologic response. Among those in the off-site, or referral, group, only 21% started HCV treatment within 12 weeks, 17% completed treatment and 14% achieved a sustained virologic response.

“In conclusion, HCV test and treat with peer support integrated into OTPs was effective and associated with significantly higher rates of HCV treatment initiation and cure compared to off-site referral to HCV treatment,” wrote the study’s authors.
