Most Prisons Can’t Afford Costly New Hepatitis C Meds

April 29, 2014

The high price of new drugs to treat the hepatitis C virus (HCV) has kept treatment out of reach for most U.S. prison inmates, halting a unique chance to curb the disease among one of the most widely infected populations, The Wall Street Journal reports.

Among the nation’s 2.3 million inmates currently incarcerated, health officials estimate that some 12 percent to 35 percent are living with hepatitis C (compared with just 1 percent to 1.5 percent in the general population). Prison and health advocates argue that treating inmates before they are released back into the general population could help drastically reduce the hepatitis epidemic.

However, the $84,000 price tag of Gilead Sciences’ Sovaldi (sofosbuvir) as well as the $66,000 price of Johnson & Johnson’s Olysio (simeprevir) has forced many U.S. facilities to either ration out or completely forgo providing the new drugs to inmates.

So far, only the Federal Bureau of Prisons, which houses about 9 percent of U.S. prisoners, has offered widespread access to the breakthrough treatments, after securing a 44 percent discount for the meds through the U.S. Department of Veterans Affairs.

State prison systems, which contain about 58 percent of all U.S. inmates, generally don’t access these price breaks. As a result, they are largely skipping out on the new meds or are only treating inmates with the worst cases of HCV.

Gilead still argues that its pricing for Sovaldi is justified because of its high potential to cure the disease and its ability to ward off more costly health-care expenses, such as liver transplants. But J&J says it is currently negotiating with prison systems to set a lower cost for Olysio.

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