# Quarterly Hepatitis C Treatment Initiations Peaked in Early 2015

That's according to an analysis of four large health systems from around the United States.

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After peaking in the second quarter of 2015, the quarterly rate of people starting hepatitis C virus (HCV) treatment in a cohort drawn from four health systems generally declined through 2017. About two thirds of the cohort members have not been treated with direct-acting antivirals (DAAs).

Presenting their findings at the Annual Meeting of the American Association for the Study of Liver Diseases in San Francisco (The Liver Meeting), researchers analyzed data from participants in the Chronic Hepatitis Cohort Study, looking at who started DAA treatment between 2014 and 2017.

The cohort included 9,235 people who had HCV as of January 1, 2014. By the end of 2017, 2,902 (31.4 percent) of them had started DAAs.

Compared with those who were 30 years old or younger, those 31 to 40 years old were 1.25 times more likely to start DAAs, and those 41 to 50 years old, 51 to 60 years old and 61 to 70 years old were 1.89, 2.41 and 2.47 times more likely to start treatment, respectively.

Compared with those with private insurance, those with Medicaid were 48 percent less likely to start DAAs.

Compared with those with an income below $30,000, those with an income between $30,000 and $50,000 were 1.21 times more likely to start DAAs, and those with an income above $50,000 were 1.51 times more likely to start treatment.

Those with more severe fibrosis were more likely to be treated than those with less severe cases.

Those who had been treated but not cured of hep C prior to 2014 were 1.84 times more likely to start DAAs.

Following the release of Harvoni in late 2014, the quarterly rate of DAA initiations shot up and reached a peak in the second quarter of 2015. The quarterly initiation rate has generally declined since then.

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