



Rural Clinics Can Partner With Pharmacists to Care for People With Hep C

Such a collaboration successfully provided treatment to a population of Native Americans and Alaska Natives.

January 22, 2019 By [Benjamin Ryan](#)

People with hepatitis C virus (HCV) who live in rural areas can successfully engage in treatment overseen by a collaboration between pharmacists and rural clinics, Healio reports. That was the finding of a recent study looking at hep C treatment targeted at Native Americans and Alaska Natives.

Publishing their findings in the *Journal of Primary Care and Community Health*, researchers analyzed data from 11 health facilities, many of them rural and understaffed, serving Native Americans and Alaska Natives with hep C.

Clinic physicians supervised pharmacists in carrying out many of the duties typically conducted by clinicians when it comes to hep C treatment. This included ordering labs, selecting direct-acting antiviral regimens, including treatment duration, and other duties. In some cases, the pharmacist also referred patients to other hep C-related services.

Of the 1,789 people who tested positive for HCV antibodies, 77 percent (1,381) took a hep C RNA test to confirm the presence of a chronic infection. (A positive HCV antibody test and a negative RNA test indicates a past infection, whether cured through treatment or spontaneously cleared by the immune system.) Sixty-seven percent (929) of the people who took RNA tests had a positive result. Of the people in that group, 62 percent (576) had the severity of their liver fibrosis scored and 58 percent (335) started treatment for HCV. Of the 274 people who received HCV viral load testing 12 weeks after completing treatment, all achieved a sustained virologic response (SVR12, considered a cure).

“These data indicate that rural clinics can be successful providing HCV diagnosis and treatment,” the study authors concluded. “Pharmacists can play a key role in HCV clinical services. The outcomes of each step in the treatment process at the facility level can vary widely due to local factors. The barriers to HCV care that persist are nonclinical.”

To read the Healio article, [click here](#).

To read the study, [click here](#).

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