Hep C Treatment Guidelines Prioritize Care

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The American Association for the Study of Liver Diseases and the Infectious Diseases Society of America have issued a new chapter of their hep C treatment guidelines that instructs clinicians on how to prioritize treatment among patients. The highest priority, the guidelines say, should be given to those who have advanced fibrosis, compensated cirrhosis and those who have had a liver transplant. High priority should also be given to those who are at significant risk for liver-related complications and for severe complications from hep C that are not related to the liver.

The language of the guidelines implies that they were established in anticipation of a possible shortage of both clinicians as well as money to pay for hep C treatment. However, members of the panel of 27 liver disease and infectious disease specialists who developed the guidelines have stressed that they recommend treatment for all, regardless of severity.

Jules Levin, executive director of the National AIDS Treatment Advocacy Project and a major national advocate for people living with hep C, says it was wrong of the panel to make prioritization recommendations. “It gave cover to all the Medicaid programs to impose restrictions,” he says.

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