Urban Injection Drug Users Succeed on Hep C Treatment With Hands-On Care Protocol

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A program of intensive care coordination, including help with the administrative hurdles of health care, showed a high level of success in getting a group of urban people with hepatitis C virus (HCV) cured of the virus. Researchers at the Montefiore Medical Center in Bronx, New York, studied the effectiveness of a care coordination system among 114 people who received a hep C health evaluation at the clinic between January 2014 and February 2015. Results were presented at the 2016 Conference on Retroviruses and Opportunistic Infections (CROI) in Boston.

The care coordinator was responsible for arranging patient appointments, making reminder calls, providing health education and obtaining prior authorizations for insurance coverage.

Sixty-seven (59 percent) of the participants started hep C treatment during the study. Sixty-four percent of those treated were male, 82 percent were black or Latino, and the median age was 60. Twenty-one percent had been treated for hep C before, 22 percent were coinfected with HIV, and 24 percent had cirrhosis. Fifty-two percent of the treated partcipants were injection drug users, including 28 participants receiving opioid agonist therapy and 24 people actively using injection drugs during hep C care.

Ninety-three percent of the treated individuals had genotype 1 of hep C. All were treated with Sovaldi (sofosbuvir)-based regimens, including Harvoni (ledipasvir/sofosbuvir).

Overall, 94 percent (63 of 67) of the partcipants were cured. There were no differences in the cure rate based on injection drug use status.

The researchers concluded that “On-site treatment with care coordination may help to mitigate barriers to specialty care and improve HCV cure rates for [injection drug users]. Similar treatment models should be replicated and tested through the 1,200 [federally qualified health centers] in the United States.”

To read the conference abstract, click here.

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