**CARE PROVIDED FOR HEPATITIS C: CONGRUENCE BETWEEN PATIENT SELF-IDENTITY AND STEREOTYPES APPLIED BY GENERAL PRACTITIONERS**

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**Introduction / Issues:** Recent advances in the antiviral treatment available for hepatitis C virus infection (HCV) will have little effect unless improvement is made to the current uptake of treatment (approx. 2%). Investigating the perceptions and experiences of people affected by HCV with private general practitioners (GPs) can allow for this pathway to care for HCV to be improved.

**Method / Approach:** We interviewed 22 purposively-selected sampled participants who a) had contracted or were at risk of hepatitis C (N=10), b) had clients affected by HCV (N=6), and c) met both a) and b) criteria (N=6). The semi-structured interviews were recorded, transcribed, and thematically analysed.

**Results:** Participants described their expectation that GPs’ professional responsibilities should include providing best practice care for people seeking help for drug use and/or HCV. It was acknowledged that GPs faced difficulties balancing this responsibility with responding to “doctor shopping”. Participants described experiences of patients seeking help for drug use, being shunned and treated as suspect. Patients, who no longer identified as someone using illicit drugs, reported that when they disclosed their HCV status, GPs treated them as patients with current drug issues. Participants described becoming cautious and selective about disclosing their drug use or HCV status to GPs.

**Conclusion:** GPs should exercise caution with all patients when prescribing drugs of dependence. The significance of drug use to a person’s self-identity may vary over time and between individuals. When GPs are assessing a patient’s drug issues, eliciting the significance of drug use to the patient would allow GPs to provide targeted care. This assessment would take into account the currency, centrality, valence (degree of attraction or aversion) and actuality (ideal versus actual) of drug use by the patient. Promoting effective engagement about injecting drug use and HCV between GPs and patients depends on the countering of stereotypes such as those described in this report.

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