ENGAGING AND CURING ACTIVE DRUG USERS OF HEPATITIS C

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INTRODUCTION

In Scotland people who inject drugs (PWID) account for over 85% of the hepatitis C virus (HCV) diagnosis. Approximately 1% of the Scottish population have been infected with hepatitis C compared to 0.5% in other parts of the UK.

Although PWID represent the group most severely affected they are the least likely to receive treatment as they are deemed to be too chaotic and difficult to treat.

The 'Eradication' study in Tayside was set up to treat 20 PWID per year in order to reduce the spread of HCV in this population. This step will assess the recruitment process and investigate if it is possible to engage, retain and treat these patients.

AIM & OBJECTIVES

To determine if it is possible to recruit, retain and cure patients of HCV from a population of actively injecting drug users.

- To recruit 100 hepatitis C positive people who inject drugs (PWID) and offer HCV treatment.
- Record sustained virological response (SVR) rates obtained.
- Monitor any long term prevalence changes within the population.

METHODS AND MATERIALS

- Identify HCV positive PWID at needle exchange centres in Tayside.
- To assess the suitability for screening and enrol these individuals onto the study.
- Initiate therapy of PEG- interferon/Ribavirin and a protease inhibitor, Telaprevir or Simeprevir, if required.
- Offer intensive support on a weekly basis by research nurses and monitor compliance.

RESULTS

30 months into a 60 month study (Table 1)

Consented	81
Commenced therapy	71
Awaiting start date	2
Stabilised drug use	3
Lost to follow up	3
Spontaneous resolver	1
No contraception	1
Patients on/completed with Telaprevir	19
Patients on/completed with Simeprevir	10

Genotype split can be seen in Figure 1. Of those who completed treatment 14/16 (87.5%) genotype 1 individuals attained a sustained virological response 12 weeks post treatment (SVR12). 27 (92.6%) genotype 2 or 3 reached SVR12 (Figure 2). Culminating an overall SVR12 rate of **90.5%**. 28 are currently on/or await their 3-month post treatment bloods.

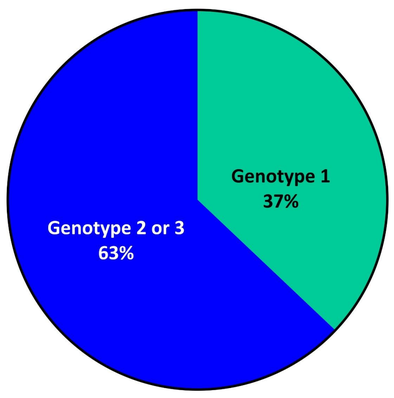

Figure 1: Genotype

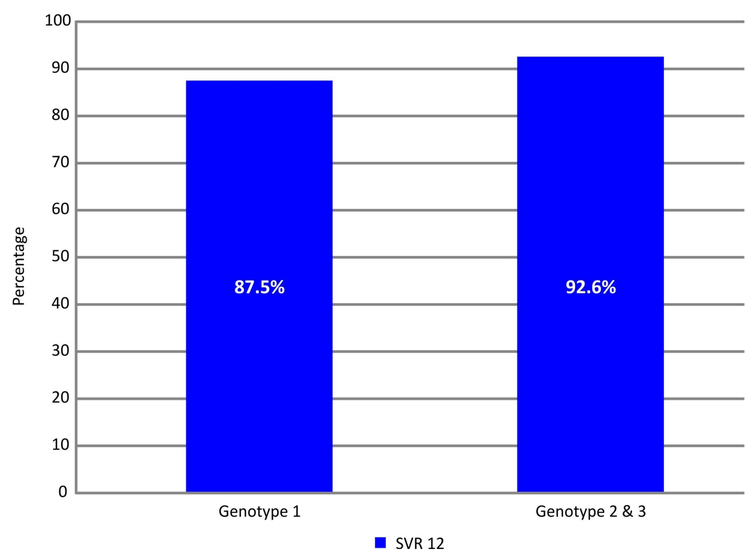

Figure 2: Genotype demographics

CONCLUSIONS

Engaging and connecting with this chaotic population with the primary outcome of achieving an SVR can be achieved. The overall SVR12 rate was a startling 90.5%, which demonstrates that HCV therapy can be delivered successfully despite ongoing intravenous drug use.

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