**HCV treatment initiation among HCV Infected PWID in CApica, A retrospective study in twelve canadian clinical settings**

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**Background**: Current hepatitis C (HCV) treatment uptake in people who inject drugs (PWIDs) is low. The advent of shorter and more tolerable regimens has the potential to lower the barriers to treatments. This observational study aimed at describing HCV disease in PWIDs currently followed in various settings across Canada. The association of HCV treatment initiation with or without new direct acting antivirals (DAAs) was examined.

**Methods**: A multicenter, retrospective, database/chart review was performed in twelve academic and community health centres across Canada. Patients receiving medical care, infected with HCV (HIV-negative) and a history of injection drug use in the past year (2014-2015) were included. Descriptive statistics and logistic regression were used to examine associations between treatment initiation and associated factors.

**Results**: Of 423 participants, 74.2% were male, 64.8% Caucasian, with a median age of 42 (18-69) years. Overall, 71 (16.8%) have initiated HCV treatment, 30 (42.3%) with all-oral DAAs and 39 (54.9%) with PegIFN-containing regimens. Factors positively associated with treatment initiation included increasing age (p<0.001), a fibrosis score of F2+ vs. F0-F1 (OR = 3.92 [1.85, 8.29]); not injecting on a daily basis (OR: 2.81 [1.41, 5.60]). Moderate drinking, defined as 10 drinks or less for female and 15 or less for male per week, was positively associated with treatment initiation (OR = 3.71 [2.05, 6.69]) relative to all other drinking patterns (heavy, none or unknown); both among females (OR = 5.96 [1.50, 23.69]) and among males (OR = 3.31 [1.71, 6.41]). No differences were observed in the demographics between treatment initiations on all-oral DAAs vs. PegIFN containing regimens.

**Conclusions**: Injection and alcohol use patterns were associated with treatment initiation among PWIDs in Canada. A better understanding of the factors leading to HCV treatment is paramount to develop and adapt targeted interventions.

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