**Hepatitis C treatment on PWUD in the daa’s era: high rate of virological response in the real life**

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**Introduction:** There is limited data on new hepatitis C treatments in people who use drugs (PWUD). Concerns about poor adherence, risk of adverse events and possible interactions with alcohol and recreational drugs represent barriers to access to treatment in this population.

**Methods:** PWUD treated for hepatitis C after the introduction of DAAs in a liver clinic and/or in an addiction clinic in Southern Switzerland were included. Study outcome was sustained virological response (SVR) 4 and 12 weeks after end of treatment (EOT).

**Results:** Of the 62 patients included, mean age was 48 years, 79% were men (49/62), 72% had advanced liver disease (n=45 with F3/F4). Five patient were HIV co-infected (8%) and 1 was liver transplanted (3%). Chronic alcoholism was reported in 22 patients (35%) and current drug use in 23 (37%).

Genotype (GT) distribution was: GT3: 52% (n=32), GT1a: 34% (n=21), GT4: 11% (n=7), GT1b: 2% (n=1), mixed GT3a/1a 2% (n=1). Treatment regimens were sofosbuvir (SOF) + daclatasvir ± ribavirin (RBV) 37% (n=23), SOF + ledipasvir ± RBV 26% (n=16), SOF + RBV 18% (n=11), SOF + simeprevir ± RBV 5% (n=3), SOF + peg-interferon + RBV 3% (n=2), ombitasvir / paritaprevir / ritonavir + dasabuvir ± RBV 5% (n=3), peg-interferon (for acute HCV) 3% (n=2). Two patients (3%) were treated in a research protocol with experimental DAAs. SVR4 was reached in 95%(41/43) and SVR12 in 95% (n=37/39) of those who completed treatment and came to follow-up controls. Two patients had a post-treatment relapse, 1 patient stopped treatment for loss of follow-up, 1 patient died for overdose during the treatment. Two patients did not come to follow-up visits after EOT. Nineteen patients were still on therapy or at EOT.

**Conclusion**: HCV treatment was successful despite high proportion of advanced fibrosis, current drug use and chronic alcoholism.

<Updated data will be presented in the definite poster>

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