

INTEGRATION OF HCV CARE IN HARM REDUCTION SETTINGS

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Background:

The aim of this study is to assess patients' perceptions about the main difficulties in accessing HCV treatment. This study derives from a larger project held in Lisbon in 2015, which aimed at assessing HCV infection in patients in a Mobile Low-Threshold Methadone Program (PSBLE). From 825 patients that fulfilled the criteria to participate in this study, 307 were diagnosed with active HCV, and 149 still remain in PSBLE without initiating treatment for HCV, while maintaining risk behaviors related to drug consumption. This group will comprise the sample for this study.

Methods:

The methodology consisted in follow-up these 149 patients to assess their perceptions about the main difficulties in accessing HCV treatment. The data will be collected from a short open-ended question form. These results will be correlated with the previous data, consisting in sociodemographic questions about social status, risk behaviours, attitudes towards HCV infection and treatment, and the results of a cognitive screening measure.

Results:

The sample demographics analysis showed an average age of 44.48 years (aged between 28-61), mostly from male gender (78.52%), with 7.95 schooling years and from Portuguese nationality (92.62%). As regards to social status, mostly were unemployed (77.18%), while 10.74% were homeless individuals. Also, 77.85% reported intravenous substance use and 37.58% abusive alcohol consumption. As regards to HCV infection, 34 had severe liver disease or cirrhosis (F3 and F4).

Conclusion:

The data show that two years after being enrolled in the study, about half of the patients (n = 149 of 307) are still waiting for HCV treatment, which pose important health risks for both the individual and the community. Therefore, the characterization of this population and the identification of HCV treatment barriers are crucial to improve treatment outcomes and to minimize associated risks.

Disclosure of Interest Statement:

It does not apply.