

HEPATITIS C REINFECTION IN THE DIRECT ACTING ANTIVIRAL ERA: A SCOPING REVIEW

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Background:

Despite highly effective direct-acting antiviral (DAA) treatment, Hepatitis C reinfection still occurs. Previous studies have examined reasons for primary infection, such as breakdown of relationships, little to no harm reduction employed, lack of knowledge surrounding Hepatitis C. However, this is in the case of primary infection, not reinfection. Moreover, studies from the interferon era highlight the impact healthcare professionals (HCPs) and services can have on patients and their willingness to seek treatment for primary infection. The scoping review was divided into two parts: 1) to discover what is known about reinfection amongst people who inject drugs (PWID) in the DAA era in a qualitative context, 2) to discover if any literature exists concerning HCPs and reinfection in the DAA era.

Methods:

Four data bases were used in the review and a search sting was created for both HCPs and PWID. Inclusion criteria: participants 18+, qualitative, reference Hepatitis C, include reinfection and include either PWID or HCPs. The studies identified had their key characteristics mapped and a thematic analysis was carried out.

Results:

For HCPs, 184 studies were returned. After duplicates were removed and screening took place, all studies were rejected as there was no mention of reinfection.

For PWID, 161 studies were returned. After duplicates were removed and screening took place, 6 studies remained. Key characteristics of the 6 studies: male dominated participants; only two countries represented; only two studies have reinfection as their focus. Themes: stigma of reinfection; avoidance of reinfection; inevitability of reinfection.

Conclusion:

There is very little qualitative data surrounding reinfection amongst PWID and no data for HCPs. This scoping review has informed my PhD and helped to identify the current gaps in the literature: lived experience of reinfection amongst PWID and HCPs opinions. Increased knowledge of reinfection can improve treatment strategies and help to eliminate Hepatitis C by 2030.

Disclosure of Interest Statement:

This study is part of a PhD project and as such no grants were received for this study.