HEPATITIS C TREATMENT WANTED YET NOT RECEIVED: BARRIERS TO RECEIVING HCV TREATMENT AMONG PEOPLE WHO INJECT DRUGS

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Background:
To expand hepatitis C (HCV) treatment for people who inject drugs (PWID), programs need to overcome barriers to initiating treatment. We asked HCV-infected PWID about past experiences with HCV care.

Methods:
These data are collected from the first 44 participants enrolled in an ongoing study of HCV care for PWID delivered at a syringe services program in New York City. Eligible participants were HCV RNA positive and had injected drugs in the past 90 days. We used a structured interview to ask about prior linkage to HCV treatment and the reasons for not obtaining treatment.

Results:
Among the 44 participants, mean age is 40 years; 73% are males; 48% Hispanic, 38% non-Hispanic white; 7% non-Hispanic black and 7% mixed-race or other. Almost all (96%) had health insurance, with 86% having public insurance (Medicaid). Most participants (91%) were aware of their HCV diagnosis before enrollment. All wanted to be treated for HCV, and 88% wanted treatment to prevent infecting others. 48% had previously been referred for HCV treatment, only 21% had been offered treatment, and none had started. When asked about barriers to treatment, 56% participants felt that they would need to stop using drugs to get HCV treatment, 61% felt that HCV treatment had many side effects and 20% reported insurance coverage barriers.

Conclusion:
Among PWID enrolled at a syringe services program, all wanted HCV treatment; most to prevent infecting others. Despite high rates of insurance coverage and desire to be treated, most participants have neither been referred to HCV care nor offered treatment. Many participants also had misconceptions about HCV treatment eligibility and side effects. Providing HCV care and education in a low-threshold model, such as walk-in visits at community sites, may help alleviate these barriers.

Disclosure of Interest Statement:
Dr. Eckhardt has received research grants to New York University from Gilead Sciences Inc. Dr. Kapadia has received research grants to Weill Cornell from Gilead Sciences Inc. Dr. Marks has received research grants to Weill Cornell from Gilead Sciences Inc, Merck, and Bristol-Meyers Squibb. No pharmaceutical grants were received in the development of this study.