

A QUALITATIVE STUDY INVESTIGATING THE LIVED EXPERIENCE OF HEPATITIS C DIAGNOSIS, TREATMENT AND CURE IN PEOPLE WHO INJECT DRUGS ON DIRECT ACTING ANTIVIRAL TREATMENT

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Background:

Advances in pharmacological interventions for hepatitis C (HCV) have enhanced sustained virological response rates and lowered side effects associated to treatment. These novel therapies have been implemented now for a number of years and this study aimed to provide updated understanding of illness perceptions and the lived experience of HCV treatment amongst people who inject drugs.

Methods:

Semi-structured interviews were conducted with 5 adults who injected drugs on HCV treatment. The interviews took place in two Injecting Equipment Provision sites in Tayside, Scotland. Data was analysed using thematic analysis, applying an inductive approach with experiential and essentialist orientation, aimed to understand and voice the experiences and perspectives of participants.

Results:

Three overarching themes were identified in the interview transcripts: 1. "Changing illness perception", providing an insight into the journey that participants embarked on from diagnosis to end of treatment. It explored how their perception of HCV changed throughout treatment, from a dichotomy of 'the great scare vs the great indifference' to the 'acceptance of individual and societal coexistence' with the virus, to the view of a 'de-stigmatised illness'; 2. "Shifting agency", presenting an internalised conflict of accepting and rejecting a sense of agency for individual behaviours, such as: a 'socially responsible injector'; 'powerlessness in drug use', as one is overcome by temptations; and 'locus of control in treatment' with healthcare staff actively providing choice and agency to patients; 3. And lastly, "Treatment adherence" which allowed participants to share what aided and hindered their treatment.

Conclusion:

Enhanced effectiveness and availability of HCV treatment is changing illness perception and social norms on treatment among people who inject drugs. Behavioural insights into sense of responsibility associated with diagnosis, sense of agency associated with treatment, and powerlessness associated with substance temptation and HCV ubiquity will help inform treatment adherence and harm reduction strategies.

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