DIRECT-ACTING ANTIVIRAL THERAPY FOR HCV INFECTION IN PEOPLE WITH RECENT INJECTING DRUG USE ATTENDING AN INNER-CITY COMMUNITY HEALTH CENTRE IN VICTORIA, CANADA

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Background:
DAA HCV therapy is effective among PWID, but more real-world data are needed. This study assessed the efficacy of DAA therapy among people attending an inner-city community health centre in Victoria, Canada.

Methods:
This retrospective study included participants treated with DAA therapy between November 2014 and June 31, 2017. Retrospective chart review was performed to assess recent injecting drug use (IDU, previous six months) or receipt of opioid substitution therapy (OST). The primary endpoint was SVR12. Secondary endpoints included HCV reinfection and mortality.

Results:
Of 239 participants who initiated DAA treatment (30% female; mean age 53 years), 95% (n=226) had a history of IDU, 21% (n=49) had HIV/HCV coinfection, 31% (n=74) had cirrhosis, 68% (n=163) had genotype (G) 1, 5% (n=12) had G2, 25% (n=60) had G3, and <1% (n=1) had G4. 45% (n=107) were receiving OST and 50% (n=119) reported recent IDU. 97% (n=233) completed treatment. Discontinuations were due to mental health (n=2), death (n=2), and non-adherence (n=2). 89% (212 of 239) achieved SVR12. Fifteen participants were lost to follow-up; two died; one had reinfection; and three had viral relapse. There was no difference in SVR12 by HIV status (HIV, 92% vs. no HIV, 88%, *P*=0.437), OST (OST, 86% vs. no OST, 91%, *P*=0.231), or recent IDU (yes, 87% vs. no, 90%, *P*=0.525). Among people with recent IDU, five cases of HCV reinfection were observed (6.2 per 100 person-years; 95% CI 2.6-15.0) and 10 people died (8.7 per 100 person-years; 95% CI 4.7-16.2), with six due to overdose.

Conclusion:
This study demonstrates that DAA treatment is effective among people receiving care in an inner-city community health centre. The high mortality in this study highlights the importance of integrating HCV care within a framework addressing drug-related harms, preventing overdose mortality, addressing social inequalities, and improving the health of PWID.

Disclosure of Interest Statement:
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