

REINFECTION RATE (RR) IN PEOPLE WHO INJECT DRUGS (PWIDs) AFTER SUCCESSFUL HCV TREATMENT. DATA FROM AN EXPERTIZED HEPATOLOGY CLINIC IN NORTHERN GREECE (THESSALONIKI)

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Background

The introduction of direct acting antiviral agents (DAAs) has revolutionized the treatment of hepatitis C in PWIDs with finite, highly effective, well-tolerated therapy. Maintenance of successful treatment in long-term follow-up is equally important. This study was undertaken to investigate HCV reinfection (Reinfection Rate, RR) in PWIDs after successful treatment with DAAs in an expertized Hepatology clinic in Thessaloniki, Greece.

Methods

The study included PWIDs who successfully completed antiHCV treatment with DAAs achieving Sustain Virological Response (SVR12), during the period from January 2017 to June 2021 and who were subsequently retested at least 3 months after achieving SVR12.

Results

392 PWIDs completed HCV therapy. 295/392 (75.26%) were tested for SVR12. SVR12 was achieved by 281/295 (95.25%). Re-testing after achieving SVR12 was performed in 91/281 (32.38%) patients, men (86.81%), mean age 46.94 years. Re-examination was either voluntary or after a scheduled appointment. More than half of them reported relapsing into intravenous drug use (self-report). 16/91 (17.58%), men 14/16 (87.5%), mean age 44.63 years were re-infected. Median follow-up time after achieving SVR12 was 1.08 years. Reinfection rate was 13.4/100 person-years. All those re-infected reported relapsing into intravenous drug use.

Conclusion

In this study although a large number of PWIDs completed HCV treatment with high rates of SVR12, a relatively small number of them were re-tested (approximately 1/3 of them). The rate of re-infection was relatively low, and was exclusively for PWIDs who exhibited dangerous drug use behaviors. Nevertheless, efforts should be made to screen PWIDs, especially those with persistent risk behaviors after HCV treatment, so that re-infection is detected in time.

Disclosure of Interest Statement

Nothing to disclose