Hepatitis C Direct-Acting Antiviral treatment completion: comparison of geographic, demographic, and clinical characteristics in Australia

Hailstone L¹, MacLachlan J², Doyle Z¹, Allard N²

¹The University of Notre Dame, Sydney, ²WHO Collaborating Centre for Viral Hepatitis, The Peter Doherty Institute for Infection and Immunity

Background

Hepatitis C virus treatment uptake varies by geographic area in Australia; however analysis has not been conducted on variation in treatment completion. This study investigated treatment completion according to remoteness, demographic, and clinical characteristics.

Methods

Retrospective analysis was conducted on all Pharmaceutical Benefits Scheme (PBS) claim data from March 2016 to June 2019. Treatment was considered completed if all prescriptions required to complete the course were dispensed. This was compared by remoteness of residence, sex, age, state/territory, treatment duration, and prescriber type.

Results

Of 68,940 patients, 85.6% completed treatment, though this decreased over time. Very remote residents had the lowest treatment completion (74.3%, OR 0.52 (0.39 – 0.7), P<0.005), and in particular those treated by General Practitioners (GPs) (66.7%, OR 0.47 (0.22 – 0.97), P=0.042).

Conclusion

This analysis suggests that very remote areas of Australia have the lowest hepatitis C treatment completion, particularly those accessing treatment through GPs. Further investigation into predictors of low treatment completion within these populations is required.

Disclosure of Interest Statement: The authors have no conflicts of interest to disclose.