

THE RELATIONSHIP BETWEEN BUPRENORPHINE MAINTENANCE THERAPY AND INCIDENT HEPATITIS C VIRUS INFECTION: A SCOPING REVIEW

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Background:

The United States (US) is experiencing an unprecedented epidemic of hepatitis C virus (HCV) infection spread by people who inject drugs (PWID) primarily injecting opioids and particularly in rural areas. Buprenorphine maintenance therapy (BMT) is an opioid agonist therapy (OAT) theorized to reduce incident HCV infection among PWID. BMT expansion in the US has occurred often without concurrent expansion of other harm reduction services. We aim to investigate the scope of evidence that delineates the relationship between exposure to BMT alone compared to other forms of harm reduction and the risk of incident HCV infection.

Methods:

We conducted a scoping review of studies assessing the risk of HCV infection while on BMT in PWID using PRISMA-ScR guidelines. We did not restrict studies based on date of study publication, study design, or sex of population. We only reviewed studies in English. We searched MEDLINE, EMBASE and Cochrane databases on November 19, 2019 and identified 568 studies to screen using our search terms (ex. buprenorphine AND hepatitis C virus AND opioid). We included studies that described the risk of incident HCV infections among people on buprenorphine for full text reviews. We extracted the population, outcome, intervention, comparison, and effect for qualifying studies.

Results:

We screened 568 studies and extracted data on 10. We found that while OAT has been shown to reduce HCV, BMT has not been studied as a single exposure compared to other forms of harm reduction services available in the US.

Conclusion:

This scoping review exposes the paucity of studies of the relationship between incident HCV among people on BMT. These results may encourage more targeted investigations of incident HCV among people on BMT given the unique circumstances of the US HCV epidemic, which especially affects rural communities with limited access to harm reduction services other than BMT.

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