





# HEPATITIS C TREATMENT ON PWUD IN THE DAA'S ERA: HIGH RATE OF VIROLOGICAL RESPONSE IN THE REAL LIFE

Moriggia A<sup>1,2</sup>, Balmelli M<sup>1</sup>, Baserga A<sup>1</sup>, Gurtner V<sup>1</sup>, Hagara D<sup>1</sup>, Magenta L<sup>1</sup>, Robatto A<sup>1</sup>, Terziroli B<sup>1</sup>, Cerny A<sup>1</sup>

<sup>1</sup> Epatocentro Ticino, Lugano, Switzerland; <sup>2</sup> Ingrado Servizi per le Dipendenze, Lugano, Switzerland.

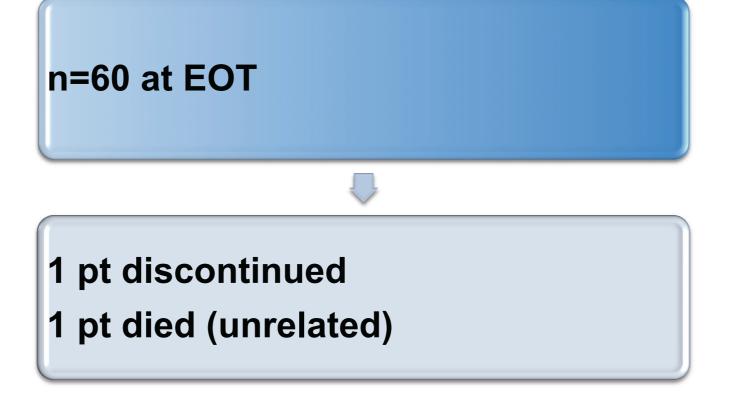
#### Background

There is limited data on hepatitis C treatment with new interferon-free regimens in people who use drugs (PWUD). Concerns about poor adherence, risk of adverse events and possible interactions with alcohol and recreational drugs represent barriers to access to treatment in this population.

#### Methods

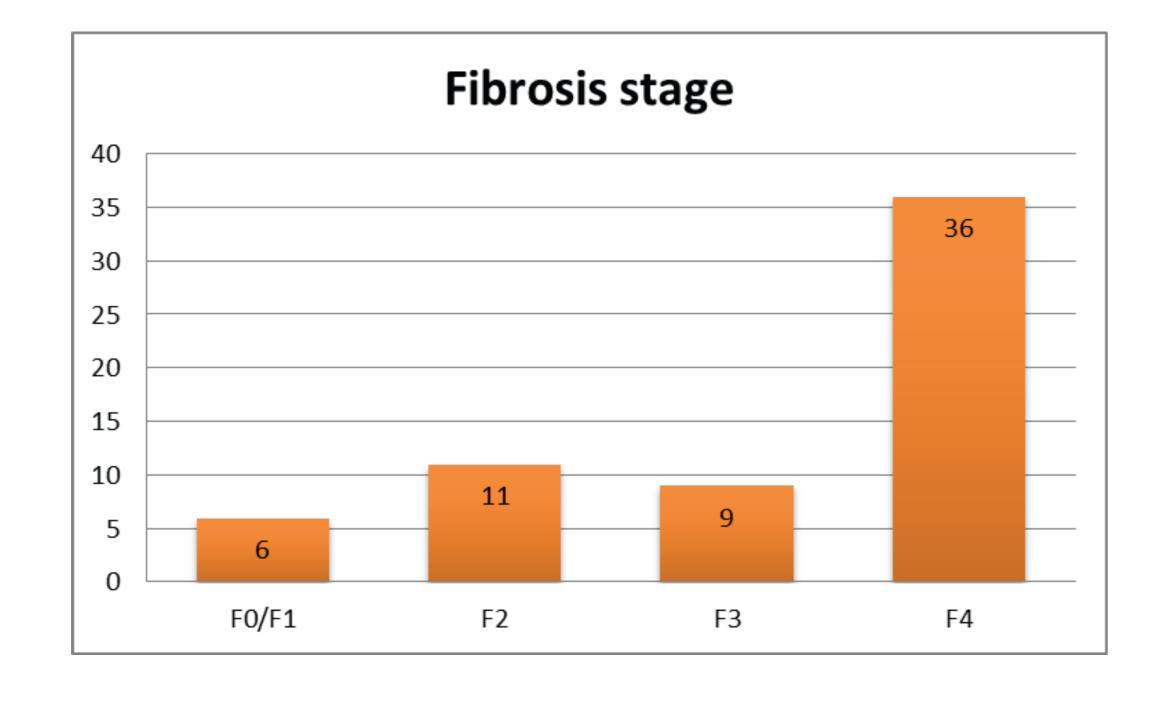
All PWUD treated for hepatitis C with directly acting antivirals (DAAs) in a liver clinic (Epatocentro Ticino, Lugano) or in an addiction clinic (Ingrado Servizi per le Dipendenze, Lugano) in Southern Switzerland were included. Study outcomes were sustained virological response (SVR) 4 and 12 weeks after end of treatment (EOT).

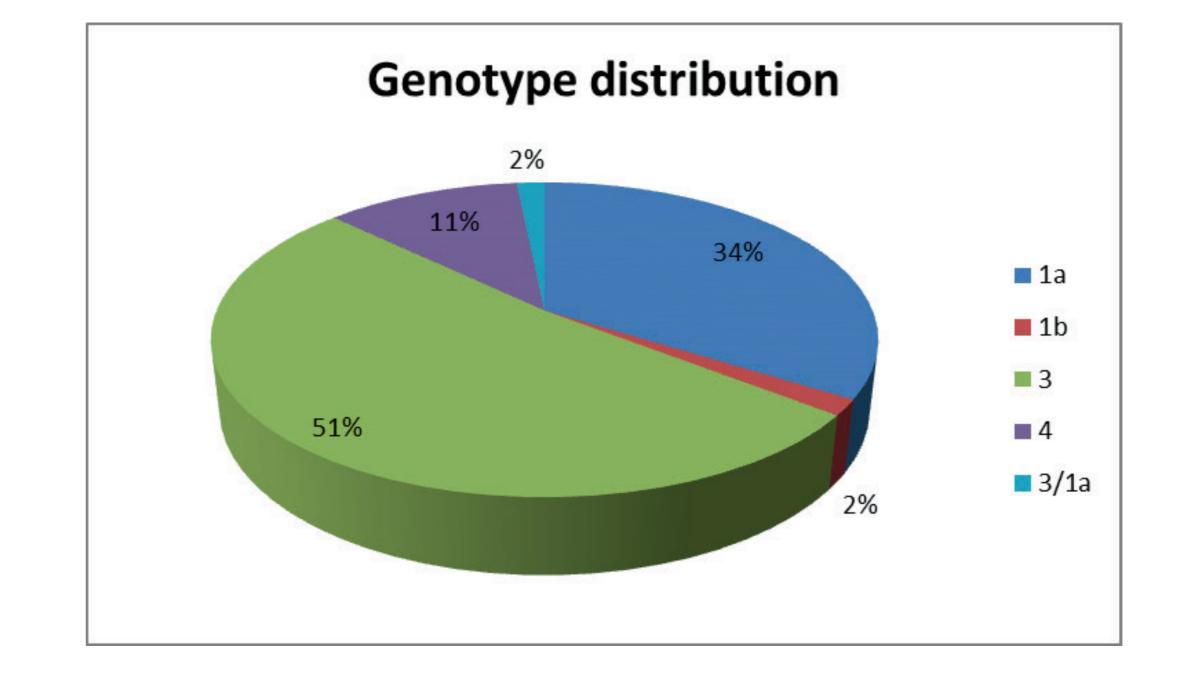
n=62 patients started treatment







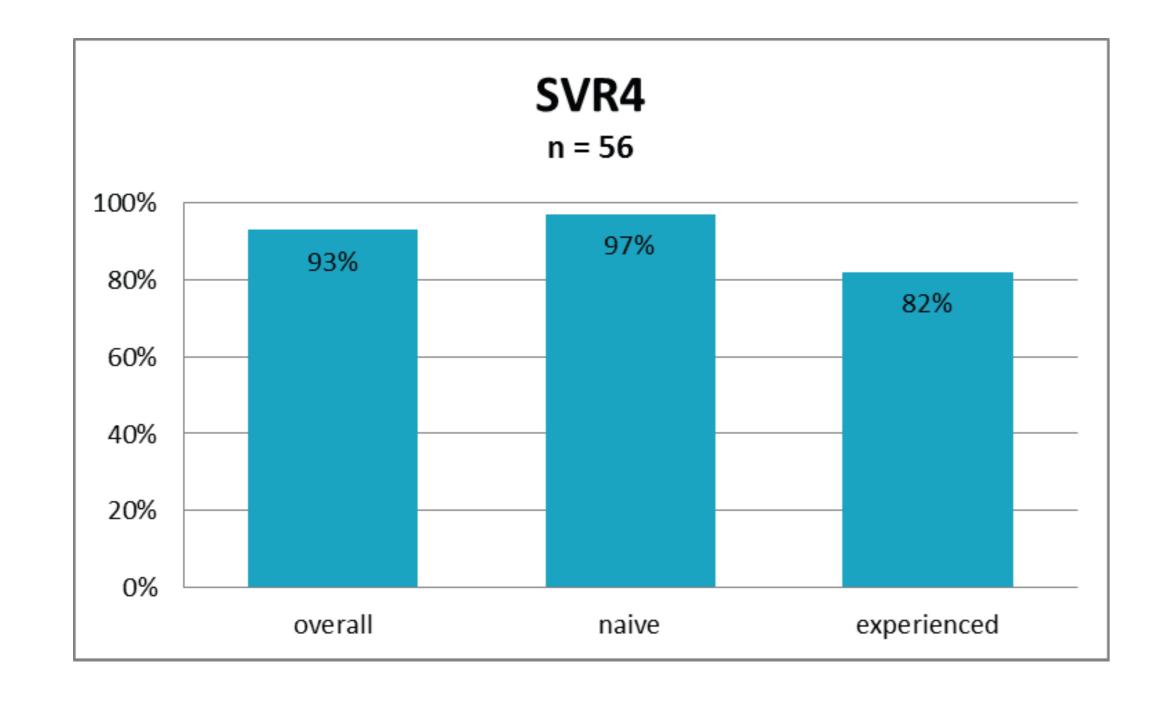


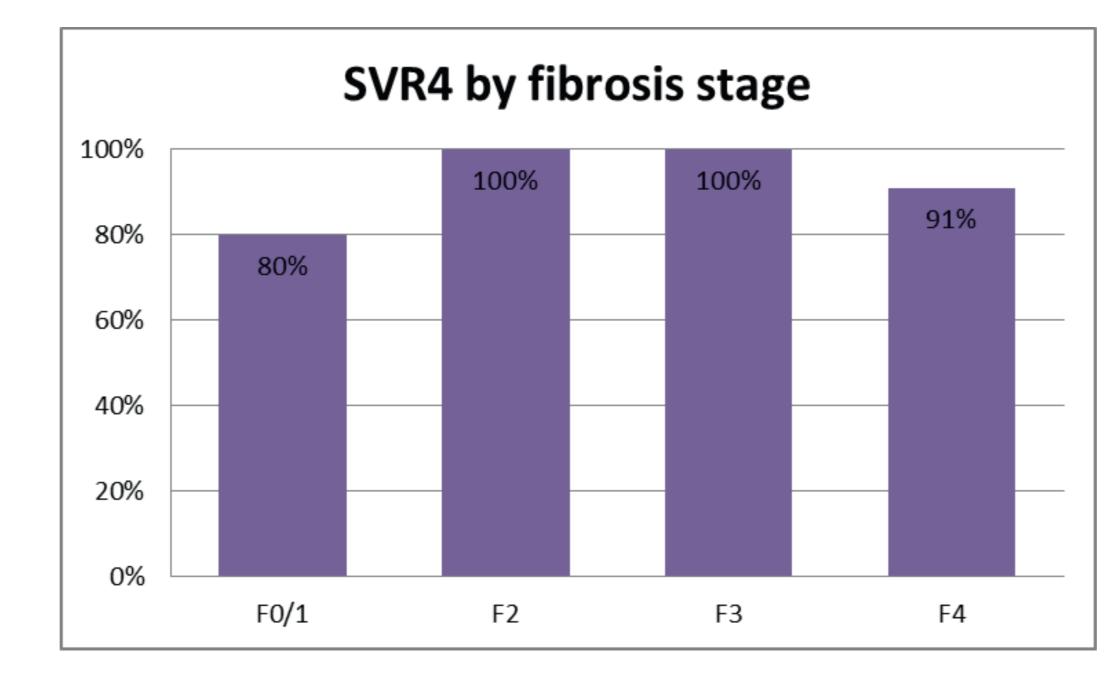


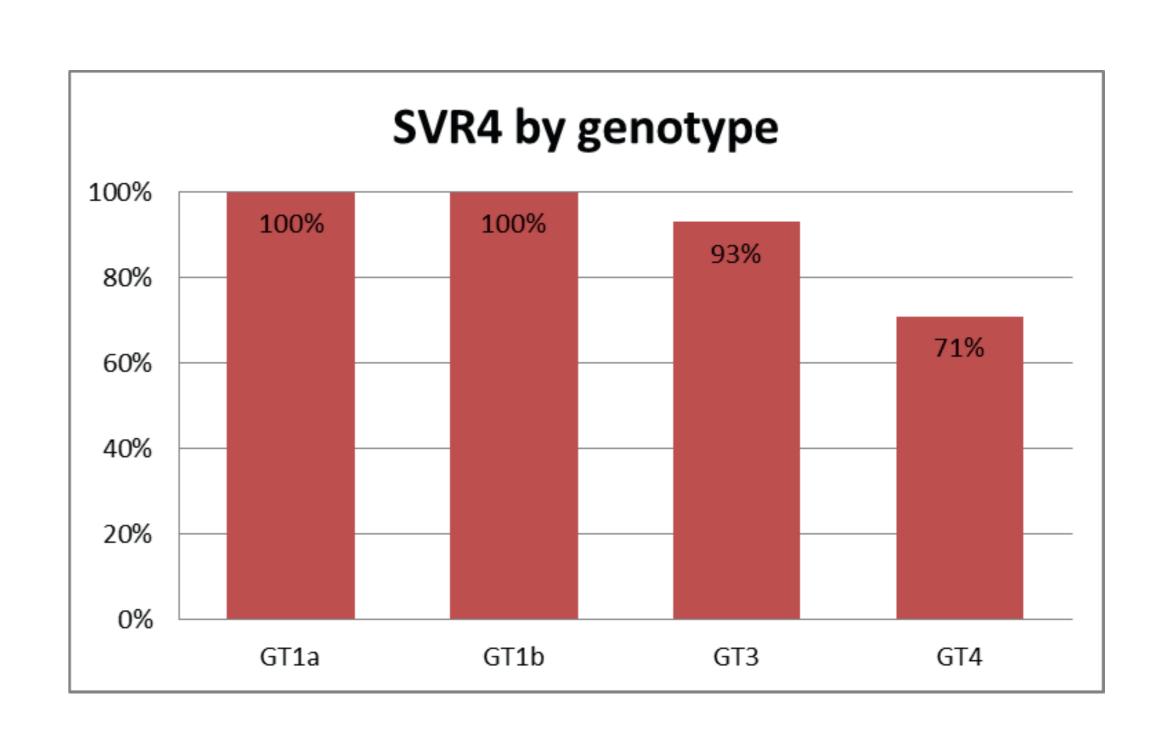
## Results

Of the 62 patients included, mean age was 48 years, 79% were men (49/62), 72% had advanced liver disease (n=45 with F3/F4). Five patient were HIV co-infected (8%) and 1 was liver transplanted (3%). Chronic alcoholism was reported in 22 patients (35%) and current drug use in 23 (37%).

Genotype (GT) distribution was: GT3: 52% (n=32), GT1a: 34% (n=21), GT4: 11% (n=7), GT1b: 2% (n=1), mixed GT3a/1a 2% (n=1). Treatment regimens were sofosbuvir (SOF) + daclatasvir ± ribavirin (RBV) 37% (n=23), SOF + ledipasvir ± RBV 26% (n=16), SOF + RBV 18% (n=11), SOF + simeprevir ± RBV 5% (n=3), SOF + peg-interferon + RBV 3% (n=2), ombitasvir / paritaprevir / ritonavir + dasabuvir ± RBV 5% (n=3), peg-interferon (for acute HCV) 3% (n=2). Two patients (3%) were treated in a research protocol with experimental DAAs. Sixty patients reached EOT. One patient stopped treatment for loss of follow-up, 1 patient died for overdose during the treatment. SVR4 was reached in 93%(52/56) and SVR12 in 92% (n=44/48) of those who completed treatment. Four patients had a post-treatment relapse. Four patients were at EOT with no follow-up data available yet for the analysis.







## Conclusions

In our interim analysis, successful hepatitis C eradication was achieved in 92% of PWUD according to SVR12 and 93% according to SVR4, despite advanced fibrosis in most patients and ongoing injecting drug use and/or elevated alcohol consume in a substantial proportion of them. Hepatitis C cure appears to be feasible in this population with high treatment's success rates comparable to non-PWUD. Further efforts are needed to improve access to care in this population.

## Disclosure of Interest Statement: