

# All people who inject drugs should be offered hepatitis C treatment

Evidence supports treatment (pegylated interferon plus ribavirin) of hepatitis C in people who inject drugs, and this high-risk population should be treated regardless of injecting drug status.

## THE ISSUE

Chronic hepatitis C infection can have significant morbidity and mortality due to liver cirrhosis and liver cancer. In high-income countries, people who inject drugs (PWID) are at greatest risk of being infected with hepatitis C, so PWID are an important target population for prevention and treatment.

## WHAT OUR WORK FOUND

Outcomes of hepatitis C treatment (pegylated interferon plus ribavirin) amongst PWID were explored in two reviews of the scientific literature.

A review published in 2009 found that:

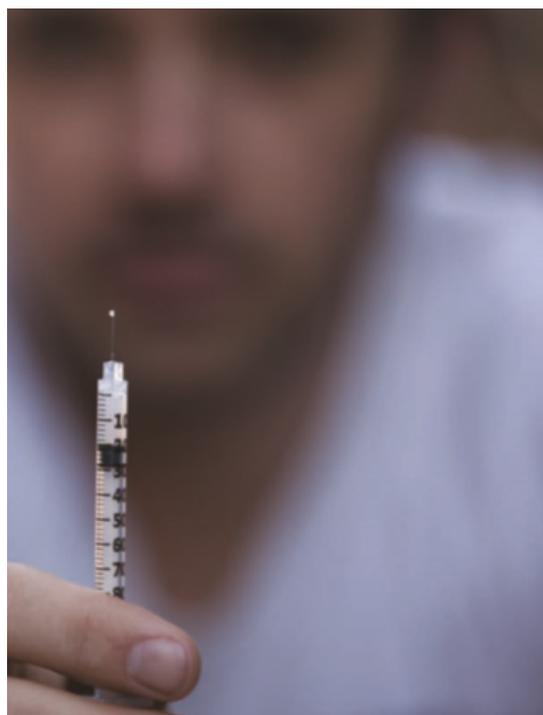
- ▶ the overall cure rate achieved with pegylated interferon plus ribavirin in PWID, calculated from data pooled from 22 studies, was 54.3%; this is comparable with cure rates in large trials, many of which had exclusions around injecting drug use. Cure rates observed in the 22 individual trials ranged from 18.1% to 94.1%.
- ▶ in the studies that directly compared PWID to people who did not inject drugs, the cure rate was often similar and occasionally higher amongst PWID.

A systematic review and meta-analysis published in 2013 found that:

- ▶ the cure rate calculated using pooled data from six studies of PWID was 56%; again, this is comparable with cure rates achieved in large treatment trials.
- ▶ the rate of treatment discontinuation was 22% (pooled data from four studies) and was consistent with rates in studies treating people who do not inject drugs.
- ▶ the risk of reinfection following successful treatment was low (2.4 per 100 person-years), but there is some uncertainty around this outcome due to a lack of data.

## CONCLUSION

Hepatitis C treatment outcomes with pegylated interferon and ribavirin in PWID were comparable to those in non-PWID. This finding supports treatment in this key population group.



## Policy Implications

PWID should be routinely offered treatment for hepatitis C, especially now that effective and tolerable direct-acting anti-viral drugs are available.

For complete details, contact **Professor Margaret Hellard** ([margaret.hellard@burnet.edu.au](mailto:margaret.hellard@burnet.edu.au)).

Full publications:

Hellard M, Sacks-Davis R, Gold J. Hepatitis C treatment for injection drug users: a review of the available evidence. *Clinical Infectious Diseases* 2009; 49: 561-73. doi: 10.1086/600304

Aspinall E, Corson S, Doyle J, Grebely J, Hutchinson S, Dore G, Goldberg D, Hellard M. Treatment of hepatitis C virus infection among people who are actively injecting drugs: a systematic review and meta-analysis. *Clinical Infectious Diseases* 2013; 57(S2): S80-9. doi: 10.1093/cid/cit306