

Swiss data on hepatitis C treatment in people who use drugs: the SAMMSU cohort.



**Erika Castro¹, Andrea Breggenzer², Philip Bruggmann³, Alberto Moriggia⁴,
Cornelia Staehelin⁵, Madeleine Rothen⁶, Pietro Vernazza⁷ and Claude Scheidegger⁸.**

**INHSU
2015**
Publication date:
September 25th

¹Policlinique d'addictologie. Service de Psychiatrie Communautaire, CHUV, Lausanne. ²Division of Infectious Diseases and Hospital Epidemiology, Cantonal Hospital Aarau. ³Arud Centres for Addiction Medicine, Zurich. ⁴Epatocentro Ticino SA, Lugano; Ingrado Centro per Le Dipendenze, Lugano. ⁵Kontrollierte Drogenabgabe Bern (KODA) and University Clinic for Infectious Diseases, Inselspital, University Hospital of Bern. ⁶Spitalzentrum Centre hospitalier Biel-Bienne. ⁷Division of Infectious Diseases and Hospital Epidemiology, Cantonal Hospital St.Gallen. ⁸Centre for Addiction Medicine Basel.

Summary

Background

Swiss data concerning hepatitis C treatment in people who use drugs (PWUD) is limited. We therefore launched a retrospective analysis of patients treated for hepatitis C in SAMMSU cohort centres.

Patients and methods

All patients followed for chronic hepatitis C treatment and opiate substitution therapies between January 2010 to December 2013 were included. We reviewed patients' laboratory follow-up, liver fibrosis assessment, comorbidities, comedication and drug/alcohol consumption during treatment. Study outcome was sustained virological response (SVR) six months after end of treatment.

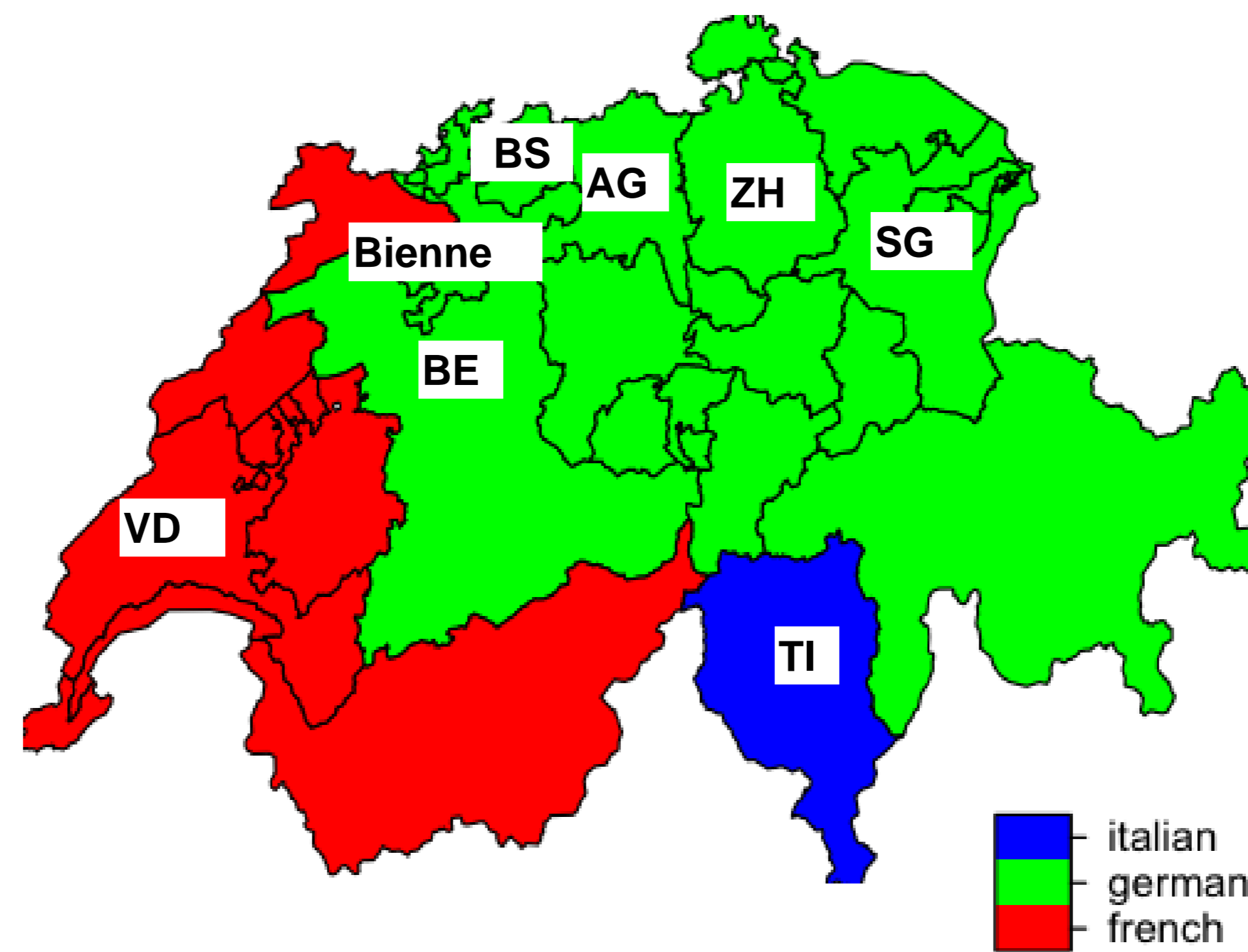
Treatment regimens

81% of patients were treated with pegylated interferon+ribavirin alone and 19% of patients harboring GT1 additionally received a protease inhibitor (8x boceprevir, 15x telaprevir, 1x faldaprevir).

Results

We assessed data of all patients treated for chronic hepatitis C (n=129). The median age was 41 years (range: 22-61), 79% were men, 58% had a liver fibrosis score of F3-F4 (n=55/95 recorded) and 63% were under psychiatric medication. Main comorbidities were: chronic alcoholism: 43%, HIV-coinfection: 17% and mental disorders (ICD-10, code F): 71%. HCV characteristics were: log₁₀ viremia, median (IQR) 5.3 (3.1-7.6), genotype (GT) 3: 53%, GT 1: 36%, GT 4: 8% and GT 2-6: 3%. SVR was reached in 66%. A relapse/breakthrough viremia/ nonresponse was seen in 31%, the dropout rate was 3%.

SAMMSU Centres



SAMMSU

The **Swiss Association for the Medical Management in Substance Users** was founded in Zurich in 2011 by internal medicine and infectious diseases specialists.

Aim

To improve medical management (prevention, diagnosis and care) of People who use drugs (PWUD) in Switzerland.

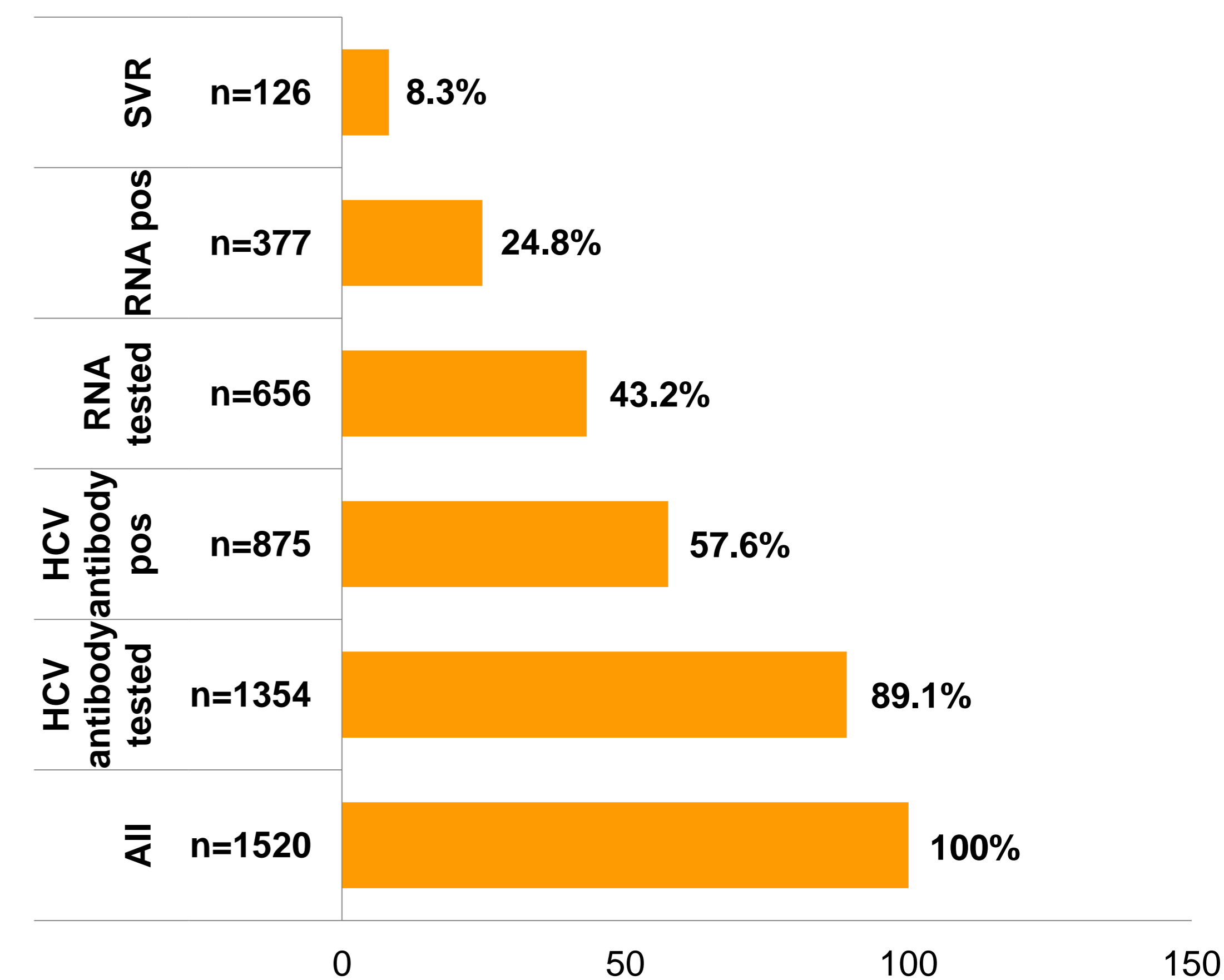
To establish a prospective cohort study of PWUD in Switzerland.

Centres and patient population by Dec. 2013

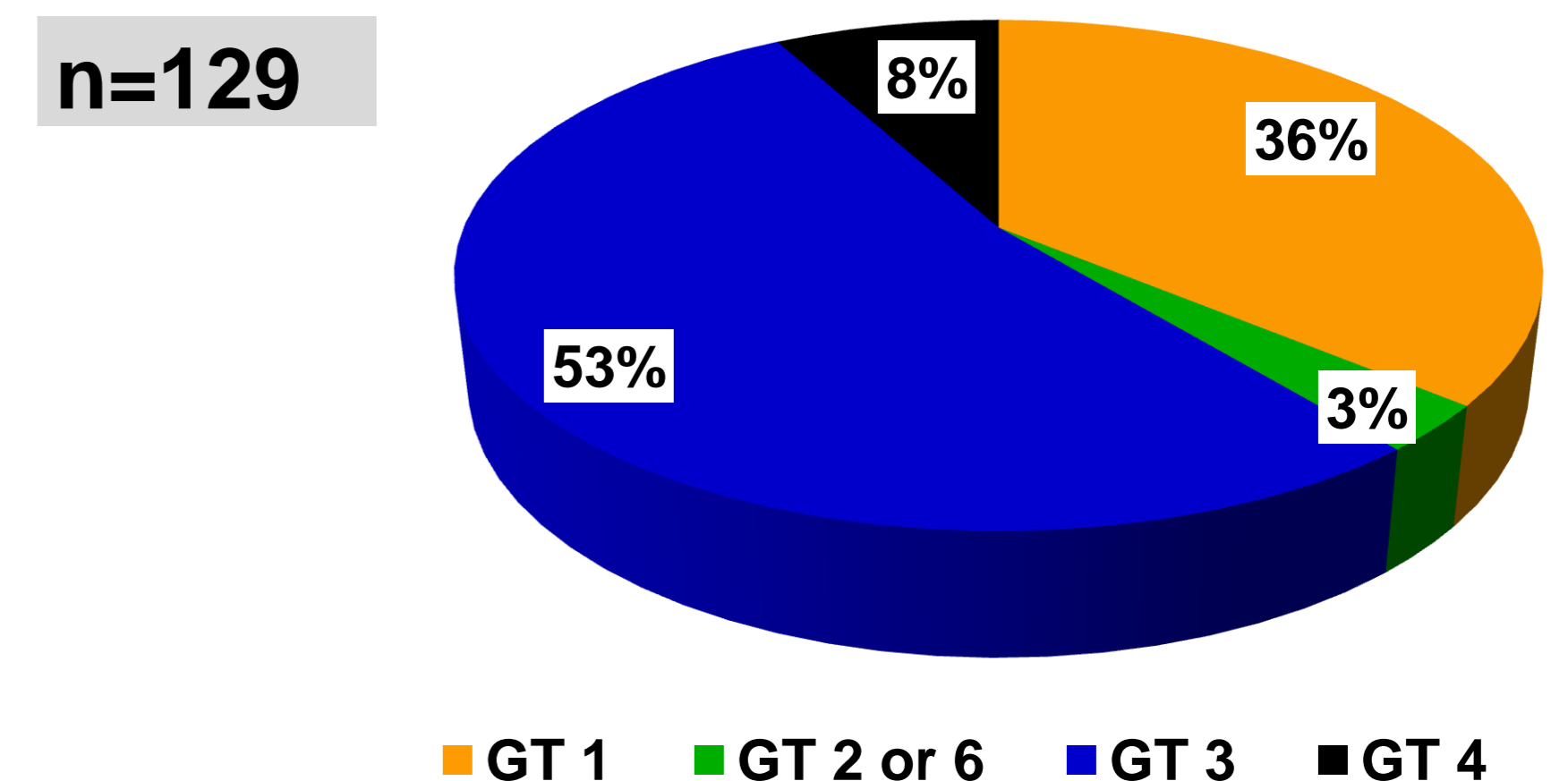
Overall 2'900 PWUD were followed at the 8 participating centres and nearly 2'000 patients were on opiate substitution therapy.

www.sammsu.ch

HCV Care Cascade (estimation based on 6 centres)



HCV genotypes distribution



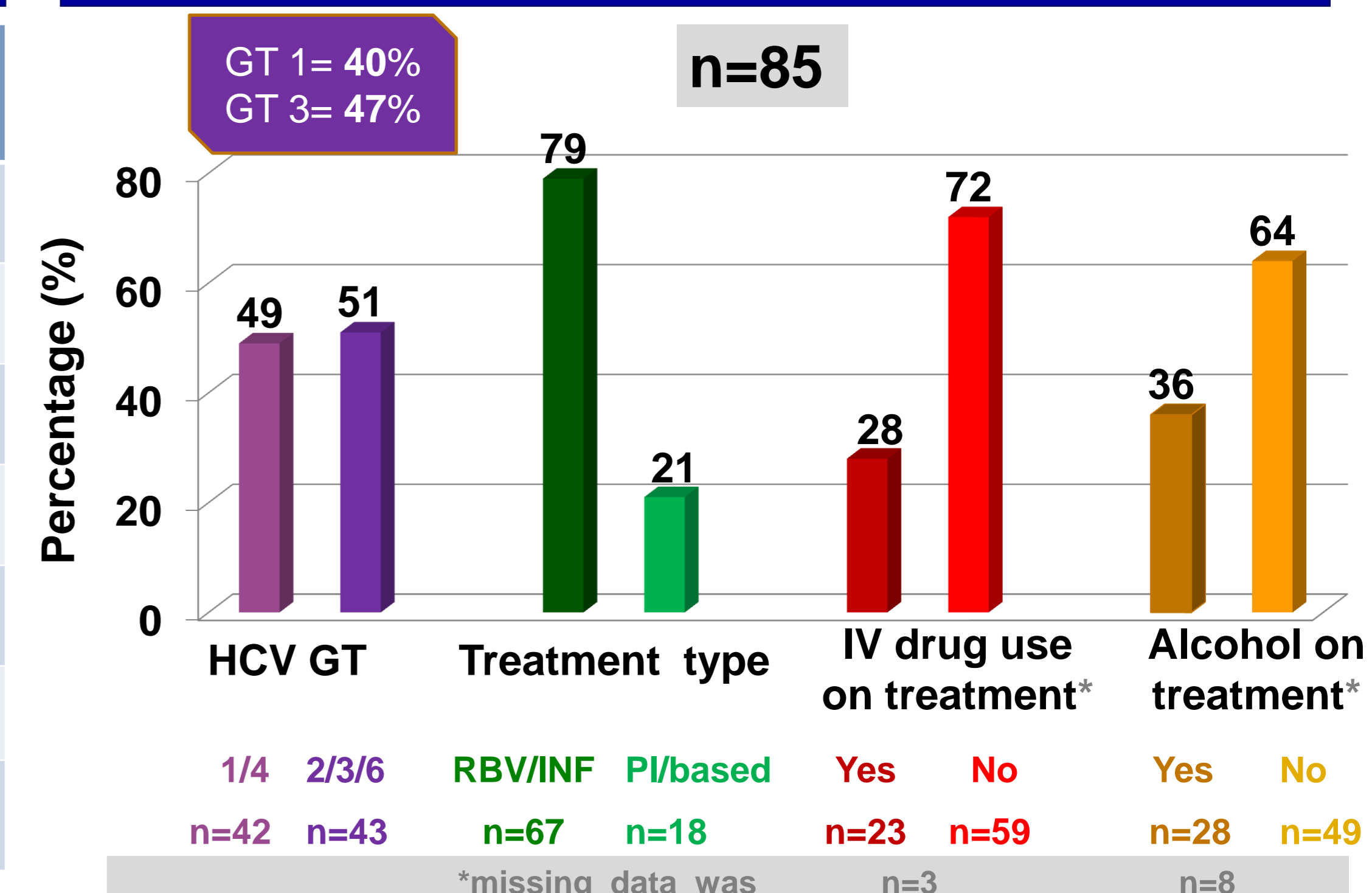
Patients' baseline characteristics

Characteristics	Study population N= 129 patients
Men	122 (79%)
Age years [median (IQR)]	41 (22-61)
BMI [median (IQR)]	21 (16-38)
History of IV drug use	119 (92%)
Chronic alcoholism	55 (43%)
Mental disorders (1 to 3 ICD-10 diagnosis)	92 (71%)
Psychiatric medications (1 to 3 drugs)	81 (63%)
HIV coinfection	22 (17%)

Hepatitis C treatment outcome

Total n=129 patients	N (%)
RVR	50 (39)
SVR	85 (66)
Non-response	10 (8)
Breakthrough	7 (5)
Relapse	23 (18)
Dropout	3 (2)
Death	1 (1)

Patients achieving SVR : main characteristics



Disclosure

This study was supported by the authors' institutional resources, by SAMMSU and by an unrestricted grant from Roche Pharma Switzerland.

Conclusion

Successful HCV treatment outcome was achieved in 66% of polymorbid PWUD despite ongoing intravenous drug use and daily alcohol drinking in a substantial proportion of patients.

Acknowledgement

The authors are grateful to all health workers participating in patient's follow-up and treatment.