

ERADICATE – C STUDY: TREATING CHAOTIC DRUG USERS TO ELIMINATE HEPATITIS C – THE FINAL REPORT



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INTRODUCTION

More than 85% of hepatitis C virus (HCV) diagnoses in Scotland are in people who inject drugs (PWIDs). Although those still actively injecting represent the group most severely affected they are the least likely to receive treatment as they can be deemed too chaotic to treat. However if “treatment as prevention” (TasP) is to work active PWIDs must be treated.

AIMS

The Eradicate study seeks out active PWIDs with HCV and offers them treatment, to determine if it is possible to deliver cure to the target population for TasP.

METHODS AND MATERIALS

- To recruit and treat 100 PWIDs over a five-year period, who are HCV positive and actively injecting.
- Genotype 1 (GT1) were treated with a protease inhibitor (Telaprevir or Simeprevir) plus PEG-Interferon/Ribavirin.
- Intensive support was provided by 1.2 dedicated research nurses and compliance and drug safety monitored on a weekly basis throughout the treatment period at the needle exchange.

RESULTS

A total of 105 patients were recruited in a 43 month period, 69 of which were diagnosed through dry blood spot (DBS) testing (Figure 1) and 72% were male. 94 patients went on to receive treatment, the genotype distribution is displayed in Figure 3. 59% had a pre-treatment viral load less than 600,000 iu/ml (Figure 2).

Of the 94 patients who received treatment, 92 SVR12 results are available. GT 1, 32/38 (84.2%) and GT2 & 3, 46/54 (85.2%) achieved SVR 12 (Figure 4). This was an overall SVR12 rate of 84.8%.

Of the 14 who did not achieve SVR12, 14 relapsed on treatment (only 4 of these patients completed the entire treatment, 7 completed less than half of the allotted treatment) and 1 became infected with a different genotype.

The rate of re-infection is 1 per 9 patient years.

Consented	N=105
Received Treatment	94
Spontaneous Resolver	3
Lost to follow up	4
Standard pathway	2
Died prior to treatment	1
Prison prior to starting	1

Table 1: Consented patients

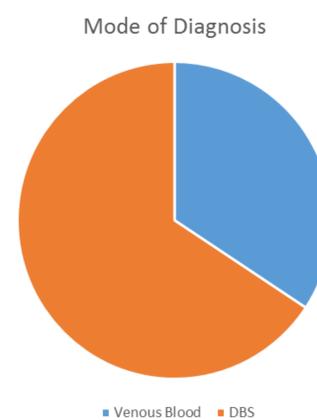


Figure 1: Mode of diagnosis

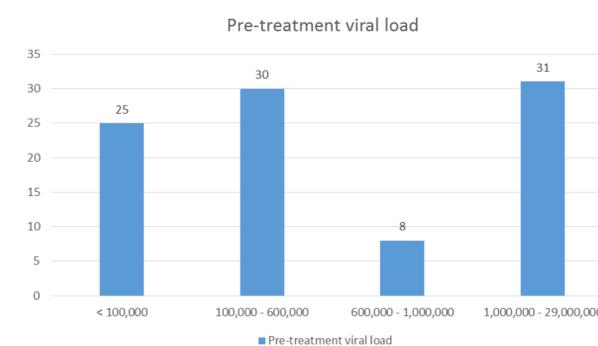


Figure 2: Pre-treatment viral load

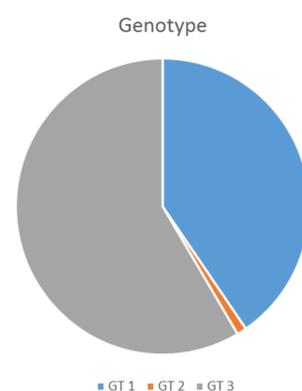


Figure 3: Genotype distribution



Figure 4: Genotype SVR 12

CONCLUSIONS

Active PWIDs can be successfully treated and cured of HCV, with SVR12 rates of 84.8% on DAA/ Pegylated Interferon and Ribavirin treatment regimes.

The re-infection rate is compatible with a treatment as prevention strategy.

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