

ORAL OPIATE PRESCRIPTION USE AS A RISK FACTOR FOR HEPATITIS C IN THOSE TESTED OUTSIDE OF THE BIRTH COHORT

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Background:

Recent surveillance data depicts an increased incidence of acute HCV in young injection drug users, most who escalate from oral opiates; and 45% of persons in the Birth Cohort(BC), reported no risk factors(RFs). EHR Screening is challenging as RFs are often entered as unstructured data, often not at all. Thus RF-based testing alone would miss many HCV-infected individuals outside of the BC.

Methods:

Non-BC HCV testing data was collected from MedStar Health and a 1:3 case-control retrospective nested chart review was conducted. HCV RFs, opiate prescriptions and other variables were manually abstracted from the EHR and Explorys. Logistic regression models were utilized to determine HCV-Ab+ predictors.

Results:

From 7/1/15 - 6/30/16, 329 charts from 4,741 HCV tested non-BC patients were reviewed; 80 (1.7%) HCV Ab+ patients were compared to 249 randomly selected HCV-Ab- controls. Patients with \geq one documented HCV RF were more likely to have Medicaid ($p = 0.005$) and Medicare ($p = 0.003$). Eighteen (23%) HCV-Ab+ and 123 (49%) HCV-Ab- had no identified RFs; 6 (33%) HCV-Ab+ reported RFs only after a positive test result. In multivariate logistic regression, persons were more likely HCV-Ab+: with reported drug use ($OR_{adj} 26$, $CI_{95} 6.1-109.8$), had Medicaid v. private insurance (3.4, 1.6-7.7), and were white (3.4, 1.5-7.9), adjusting for demographic factors and opiate prescriptions ($ROC = 0.823$). There was a significant interaction between age >40 and opiate prescriptions and were 11x more likely to be HCV-Ab+ ($CI_{95} 1.6-74.8$).

Conclusions:

Drug use remains a significant predictor of HCV positivity outside the BC, though white race was more significant than black race. The CDC has reported an increase of HCV in injection opiate users'; our data shows an interaction for oral opiate use, often a precursor. Given patient and provider barriers in elucidating RFs, universal testing and those on chronic opiates may be warranted.