

LOW HEPATITIS C SEROCONVERSION RISK IN METHADONE MAINTENANCE TREATMENT CLINIC IN ISRAEL

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Introduction: To study the risk factors for seroconversion to hepatitis C virus (HCV) infection since admission to methadone maintenance treatment (MMT) and to characterize the seronegative admitted group.

Methods: All 910 patients admitted to our MMT clinic in Tel Aviv, Israel, between 1993 and 2016 were prospectively followed up. HCV antibody data was available among 867 (95.3%) of them. Those who were HCV negative (n = 389) and retested during treatment at least once (n=284) were included for seroconversion analyses.

Results: Proportions of ever drug injectors (87.8% vs. 39.7%, $p < 0.0005$), benzodiazepine abuse (64.7% vs. 51.8%, $p < 0.005$), 20 years or longer of opioid usage (44.5% vs. 34.9%, $p = 0.006$), and being an immigrant (mainly from the former USSR) (45% vs. 23.8%, $p < 0.0005$) were significantly higher among HCV sera-positive versus sera-negative patients on admission to MMT. The incidence of HCV sero-positive conversion in MMT was 1.1/100 person years [py] (25 seroconversions, 2268.1 py). Seroconversion rates were higher among 229 younger patients (<30 years: 3.7/100 vs. 0.57/100 py, $p < 0.0005$), among 144 patients with positive urine results to benzodiazepines (1.6/100 vs. 0.65/100 py, $p = 0.05$), among 114 patients who ever injected drugs (2.2/100 vs. 0.4/100 py, $p < 0.0005$), and among 55 patients who dropped out and were readmitted to the MMT (2.1/100 vs. 0.8/100 py, $p = 0.03$). Overall, 50 HCV patients had started HCV treatment, and 30 have completed it. The referral to treatment is increasing nowadays with the available new medications.

Conclusion: The HCV seroconversion rate of patients in MMT is low, also, for former USSR immigrants. The predictors for seroconversion were only admission variables (younger age at admission to MMT, ever drug injector, and having positive urine to benzodiazepines at MMT admission). Specific intervention to eliminate seroconversion is needed for these high-risk groups, together with expansion of HCV treatment, in order to eliminate this disease.

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