

PSYCHIATRIC AND SUBSTANCE USE CHARACTERISTICS ARE NOT BARRIERS FOR MEDICATION APPROVAL AND ACHIEVING SVR IN AN URBAN HCV POPULATION

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Background:

Psychiatric instability and active substance use can be barriers to patients initiating and completing Hepatitis C Virus (HCV) treatment and can also decrease provider willingness to treat this population. The REACH program is a multidisciplinary primary care based HCV treatment program that aims to successfully treat patients with significant psychosocial challenges using a harm reduction approach.

Methods:

We conducted a retrospective chart review of 141 patients at the Mount Sinai REACH program for whom HCV medications were ordered between November 1, 2014 and October 31, 2015 and who had completed a psychosocial readiness assessment (PREP-C) that included psychiatric and substance use domains. We examined the relationship between these patient characteristics and the number of steps in the prior authorization (PA) process; time to medication approval in days; and eventual achievement of sustained virologic response (SVR).

Results:

Medication approval was successfully obtained for 130/141 (92%) patients in a mean of 1.7 steps (SD= 0.68) and 55.6 days (SD=51.0). Psychiatric and substance use stability were not associated with medication approval, number of steps to approval, or number of days to approval. HCV treatment was started by 127/141 patients (90%) and 109/127 patients (85.5%) achieved SVR 12. There was no relationship between psychiatric and substance use stability and achieving SVR. We characterized the psychiatric and substance use instability in four categories: (1) Only substance use (17/127), (2) only psychiatric (31/127), (3) both (23/127), and (4) neither (56/127) and also found this to be unrelated to achieving SVR.

Conclusions:

Once patients reach the point of having medications ordered in our HCV program, psychiatric and substance use characteristics play no role in the approval process or in treatment outcomes. Our multidisciplinary model of care provides the necessary support and interventions needed by patients with HCV and comorbid substance use and/or psychiatric disorders.