**Introduction and Objectives:** Hepatitis C Virus (HCV) infection treatment has changed significantly lately with all-oral direct acting antivirals (DAAs). Patients on opioid substitution therapy (OST) and substance users have been assumed as difficult to treat because of possible lack of adherence and potential side effects.Objectives: support that current available DAAs can be used safely in this special populations and compare adherence and sustained virological response (SVR).

**Material and methods:** Clinical processes were reviewed of patients who completed HCV treatment from April 2015 until December 2016 in a District Hospital in Portugal. Assessment of demographics of patients receiving OST, characterization HCV infection, hepatic fibrosis, therapy and virological response.

**Results**: 203 patients on DAAs were enrolled and 30 (14,7%) were on OST (methadone or buprenorphine). 90% were male. 36% patients were sent from primary care and 17% from a Drug Addiction Centers. Of all patients (OST and non OST), 97% the route of transmission was former injecting drug use, Genotype 1 was the most prevalent (67%), 60% had ongoing alcohol consumption and 50% were consuming other substances. 93% patients were not treatment experienced and 30% (n=60) had cirrhosis.

Among people receiving OST, 20% (n=6) had cirrhosis and 2 patients were treatment experienced. Therapeutic choice in this population was Sofosbuvir + Ledipasvir (70%). The SVR in patients on OST was 100%. Only 3 patients (10%) presented some type of irregularity on treatment adherence, but not being reflected in response to treatment. Only 3 presented side effects, but had no need to stop treatment.

**Conclusion**: Patients receiving OST had no lower treatment adherence or SVR compared to the rest of the patients, nor did they show more adverse effects. Therefore, we can conclude and support that these patients can be treated safely, successfully and effectively with the new all oral DAAs.