

HEALTH RELATED QUALITY OF LIFE OF PATIENTS IN OPIOID SUBSTITUTION THERAPY AT THE BEGINNING OF HEPATITIS C TREATMENT – DATA FROM THE GERMAN HEPATITIS C-REGISTRY (DHC-R)

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Background: HCV-treated patients in opioid substitution treatment (OST) have shown persistently decreased health-related quality of life (HRQL). We characterize HRQL of OST and other patient groups after admission to HCV treatment. We also examine whether disease-related and psychosocial factors help explaining HRQL differences between patient groups.

Methods: The DHC-R is a national real-world registry including about 17,200 patients. Short-Form 36 (SF-36) data from n=554 OST, n=734 patients with past drug use (Non-OST/DU) and n=4147 patients with no history of illicit drug use (Non-OST) were analyzed as of Jun 30, 2019. Data were compared with those from the German general population, collected by the National Health Interview and Examination Survey. Patient groups were compared using linear regression with medical, psychiatric and sociodemographic variables as covariates.

Results: Low HRQL was defined as a score below the 25th percentile of the general population, stratified by age and gender. On 7 out of 8 SF-36 scales, the proportion of OST with low scores was large (range 50.2-67%), except “bodily pain” (21.5%). Proportion of Non-OST patients with low scores was 33.2-45.7% for most scale, and 13.7% for bodily pain. Non-OST/DU ranged between the other groups. In linear regression with predictors: patient group and age, gender, immigrant status, number of somatic diseases, antidepressant use, cirrhosis, and current alcohol use, all variables except immigrant status had a statistically significant association with SF-36 physical health summary score, and all predictors except immigrant status and somatic diseases were significantly associated with the mental health summary score.

Conclusion: The proportion of OST patients with low HRQL was large at the beginning of HCV treatment, and larger than in former or never drug users. A statistically significant group difference between patient groups remained after adjusting for age, gender, severity of the disease, depression and somatic comorbidity.

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