

HCV Treatment of Injecting Drug Users in the Czech Republic – Survey among Viral Hepatitis Treatment Centres



MRAVČÍK, V.

National Monitoring Centre for Drugs and Drug Addiction, Prague,
Department of Addictology, 1st Faculty of Medicine, Charles University in Prague and General University Hospital in Prague,
Czech Republic

Citation: Mravčík, V. (2012). Léčba VHC u injekčních uživatelů drog v ČR – průzkum mezi centry pro léčbu virových hepatitid. *Adiktologie*, (12)1, 10–22.

BACKGROUND: Injecting drug users (IDUs) represent a significant group of patients with the hepatitis C virus (HCV) infection. The initiation, process, and efficacy of treatment are determined by factors on the part of both patients and treatment providers. **AIMS:** Mapping the extent of the provision of HCV treatment to IDUs in the Czech Republic, mapping the rules and practices in the initiation and provision of HCV treatment in IDUs and relevant factors. **MATERIAL AND METHODS:** From January to March 2011, all 76 identified viral hepatitis treatment centres were addressed with on-line questionnaire, of which 45 reacted, and 40 responded. **RESULTS:** It can be estimated that HCV treatment (using a combination of interferon and ribavirin) was provided by 61 centres in 2010, 39 of which treated (mostly abstinent) IDUs. An estimated 780 persons were treated in 2010, of whom 370 IDUs. The level of reported treatment uptake in IDUs referred to centres was 60% on average. Treatment was on average completed in 80%. Most clinicians reported no difference in the treatment uptake or adherence between drug users and non-users and between methamphetamine and

opiate users. Most clinicians also did not report any differences between methamphetamine and opiate users in their liver conditions, motivation for treatment, or risk of relapse into drug use. All or most of the patients are required to abstain from drugs upon the start of treatment in 90% of the centres, the most frequently for six months at least. Most physicians test adherence in a trial period before the treatment. The assessment of the patient's drug use was often performed by collaborating psychiatrist or addiction specialist. Half of physicians reported that they require substitution therapy in opiate users. An addiction specialist was a permanent member of the team in a few centres only; substitution therapy was only rarely delivered in centres themselves. As many as nearly half of the centres did not cooperate with specialised drug treatment facilities. **CONCLUSIONS:** Clinicians in the Czech Republic possess rather conservative attitudes towards HCV treatment in IDUs, active IDUs are treated exceptionally. The main barriers of the higher HCV treatment uptake are represented by a lack of multi-disciplinary approach, a low integration of HCV and addiction treatment and financial limits.

KEY WORDS: VIRAL HEPATITIS C – INJECTING DRUG USE – METHAMPHETAMINE – INTERFERON – RIBAVIRIN – TREATMENT – ADHERENCE – EFFICACY

Submitted: 21 / DECEMBER / 2011

Accepted: 7 / MARCH / 2012

Grant support: Internal Grant Agency of the Ministry of Health of the Czech Republic, Reg. No. IGA 10034-4 (Social Costs of the Misuse of Tobacco, Alcohol, and Illicit Drugs in the Czech Republic)

Address for correspondence: Viktor Mravčík, M.D. / mravcik.viktor@vlada.cz / National Monitoring Centre for Drugs and Drug Addiction, Office of the Government of the Czech Republic, Vladislavova 4, 118 01 Prague 1, Czech Republic