

## Background

HCV infection disproportionately affects HIV infected patients.

HIV/HCV Co-infected patients are more likely to develop advanced liver disease/cirrhosis in comparison to mono-infected patients.

Despite the effective treatments, only small portion of co-infected patients are treated for HCV infection. One of the known barriers to HCV treatment is active substance abuse.

There is limited information about outcomes of HCV treatment with active substance abuse in HIV/HCV co-infected patients.

## Methods

Retrospective cross-sectional study of HIV/HCV co-infected patients that were treated for HCV between 2014-2017 at Drexel University, Philadelphia, PA.

### Definition:

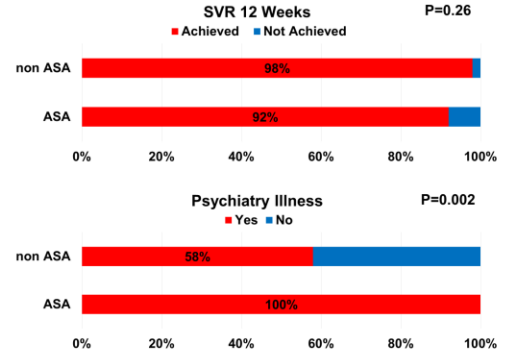
**Active Substance Abuse (ASA)**  
= Self-report of active drug use at the time of treatment evaluation.

Patient demographics and overall HCV sustained virologic response at 12 weeks after treatment were described.

## Results

Table 1: Comparison between ASA versus non ASA

	Total N=138	ASA N=13	Non ASA N=125	P value
Gender				
Male	100 (73%)	9 (69%)	91 (73%)	0.784
Race				0.754
White	22 (16%)	2 (15%)	20 (16%)	
Black	100 (72%)	9 (69%)	91 (73%)	
Hispanic	16 (12%)	2 (15%)	14 (11%)	
Marital Status				0.332
Married	18 (13%)	0	18 (14%)	
Separated/widowed	21 (15%)	3 (23%)	18 (14%)	
Never married	99 (72%)	10 (77%)	89 (71%)	
Insurance				0.755
Medicare	37 (27%)	2 (15%)	35 (28%)	
Medicaid	83 (60%)	11 (85%)	72 (58%)	
Private	12 (9%)	0	12 (10%)	
No insurance	6 (4%)	0	6 (5%)	
Housing (N=133)				0.522
No	7 (5%)	1 (8%)	6 (5%)	
Yes	126 (95%)	12 (92%)	114 (95%)	
Diabetes Mellitus	28 (20%)	2 (15%)	26 (21%)	0.485
Hypertension	69 (50%)	4 (31%)	65 (52%)	0.243
Chronic HBV infection	2 (1%)	0	2 (2%)	1
Fibroscore (N=133)				0.224
F0-2	62 (47%)	8 (67%)	54 (45%)	
F3-4	71 (53%)	4 (33%)	67 (55%)	



## Conclusion

In our study, direct active antiviral HCV treatment was highly effective in HIV/HCV co-infected patients.

Treatment outcomes were not different between active substance abuse group and none user group.

Given co-infected patients have worsened prognosis with chronic HCV infection, active substance abuse should not be an absolute contraindication to HCV treatment.

