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The Impact of Psychosocial Factors on Success Rates of Hepatitis C Treatment

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Abstract

Purpose: Our study was to determine which psychosocial factors interfere with patients reaching sustained virologic response (SVR), a marker for HCV eradication.

Methods: A retrospective chart review was performed between 1/6/15-2/24/16. The primary outcome was to assess which social and psychological factors may interfere with patients reaching SVR. SVR was defined as having an undetectable viral load 12 weeks after the completion of the treatment regimen. Bivariate analysis was followed by a multivariate logistic regression analysis to determine significant factors for SVR. Depression and generalized anxiety disorder were included.

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Results: A total of 204 patients completed treatment within the designated timeframe and were included in the final analysis. Social or home support was associated with SVR (odds ratio (OR): 7.0, p=0.02). Cocaine use was also a significant factor predicting SVR. Historical cocaine use compared with active cocaine use during treatment was associated with an odds ratio of SVR of 39.3 (p=0.04). Interestingly historical cocaine use versus no history of cocaine use did not influence SVR. No history of depression or generalized anxiety disorder (GAD) was associated with a higher rate of SVR (OR: 10.4, p=0.05). No depression/GAD compared with untreated depression/GAD was associated with a 13.1 times greater rate of SVR (p=0.04).

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