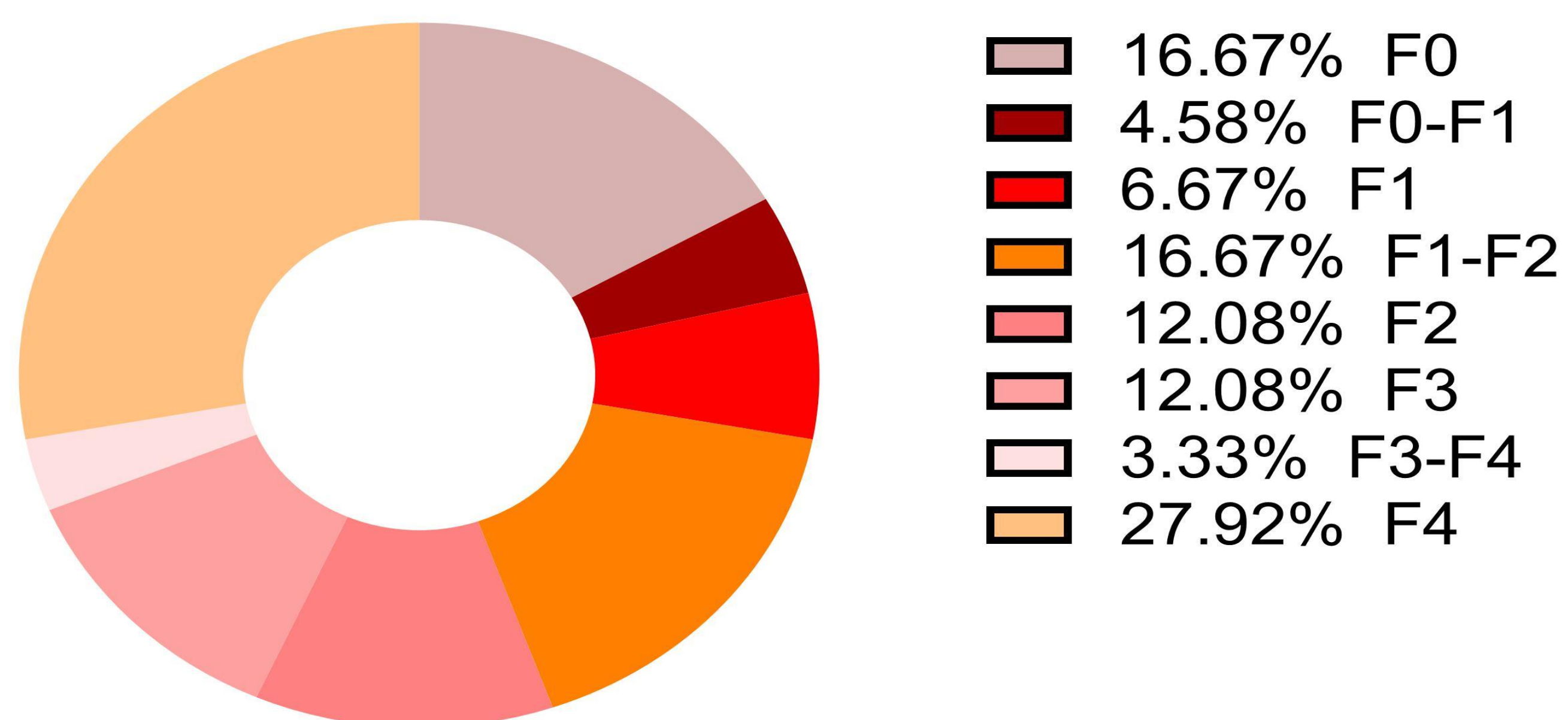


240 HCV patients

Group 1
dasabuvir/
ombitasvir/paritaprevir/ritonavir
Or
ledipasvir/sofosbuvir

Group 2
glecaprevir/pibrentasvir
Or
sofosbuvir/velpatasvir

Fibrosis Stage



Characteristics	Group 1 (n=200)	Group 2 (n=40)	p-value
Age, years	59.63±11.84	59.80±10.45	0.950
Gender, male	56 (28%)	8 (20%)	0.297
Severity	5.40±2.96	5.15±2.92	0.568
SVR, yes	195 (97.5%)	40 (100%)	0.313
Score15D_1	0.90±0.08	0.92±0.11	0.026
Score15D_2	0.94±0.07	0.94±0.08	0.708
Score15D_diff	0.04±0.11	0.02±0.15	0.055
HCV-AD10	90.99±8.71	92.06±8.06	0.529

Real-world data on Health-Related Quality of Life (HRQoL) and direct-acting antivirals (DAAs) in chronic hepatitis C virus (HCV) are still scarce. We focused on studying how the latest generation interferon-free treatment can change HRQoL and DAAs adherence in Romanian HCV affected patients.

All patients with chronic HCV who received DAAs treatment (dasabuvir/ombitasvir/paritaprevir/ritonavir or ledipasvir/sofosbuvir, Group 1, and glecaprevir/pibrentasvir or sofosbuvir/velpatasvir, Group 2) at the Gastroenterology Department from University County Hospital of Craiova, Romania, in the period May 2020 – March 2022, were included.

We aimed to understand if adherence is one of the barriers to achieving sustained virological response (SVR) for patients with chronic hepatitis C virus (HCV) treated with direct-acting antivirals (DAAs). Health-Related Quality of Life (HRQoL) was also evaluated to predict adherence in Romanian HCV patients.

Medication adherence was assessed using HCV-AD10, a validated tool on Romanian patients with HCV.

HRQoL was measured using 15D instrument at baseline and at the end of treatment (EOT).

Mann-Whitney U test was used to assess the difference between the treatment groups for patients' characteristics, HRQoL and adherence.

Spearman's rho were used in correlation data analysis.

Of 240 patients, 73.3% were female, age 59.7±11.6 years, 28% were in the F4 stage of fibrosis. The cure rate was 97.9%, 51.7% being treated with dasabuvir/ombitasvir/paritaprevir/ritonavir.

Discussion

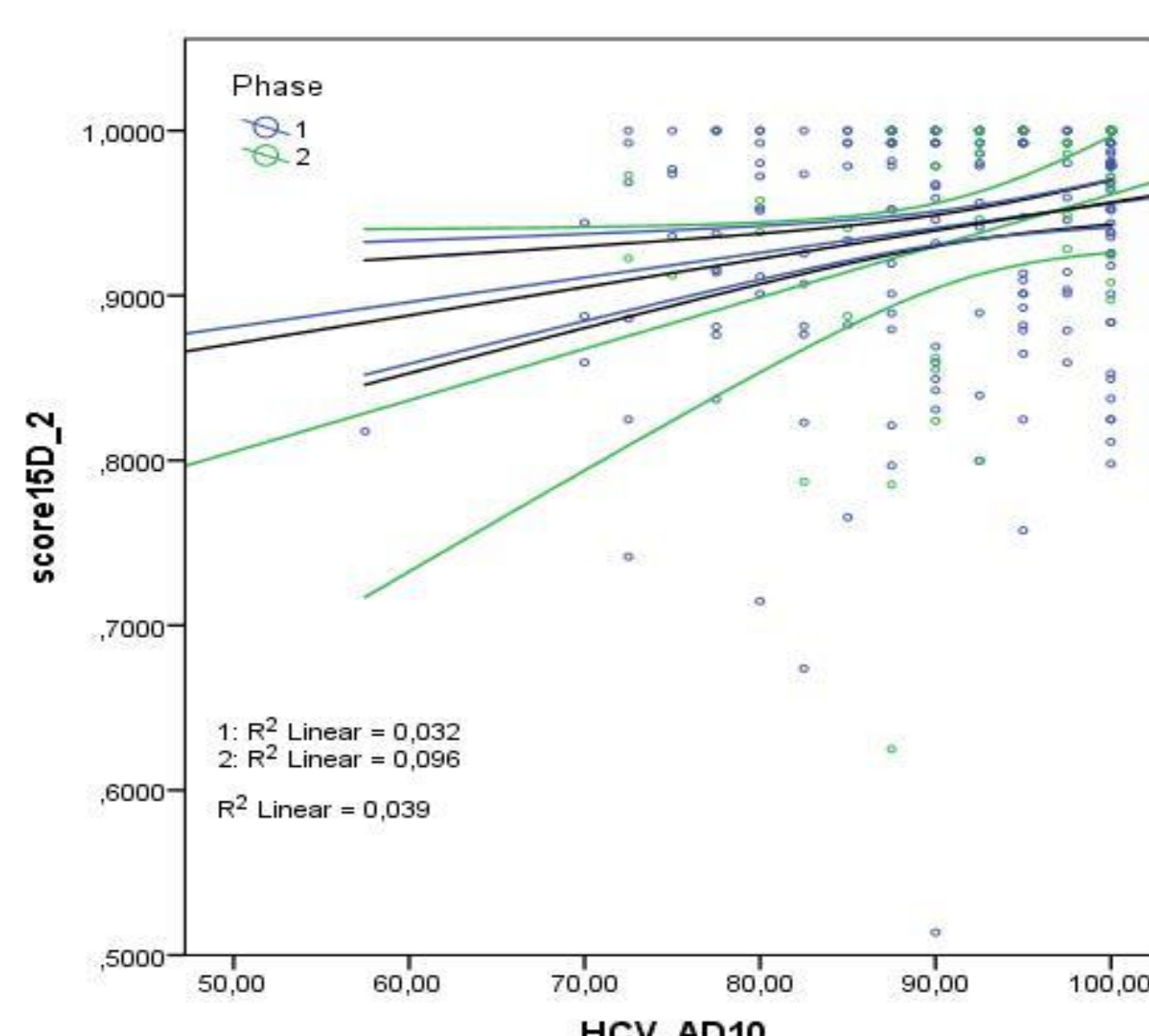
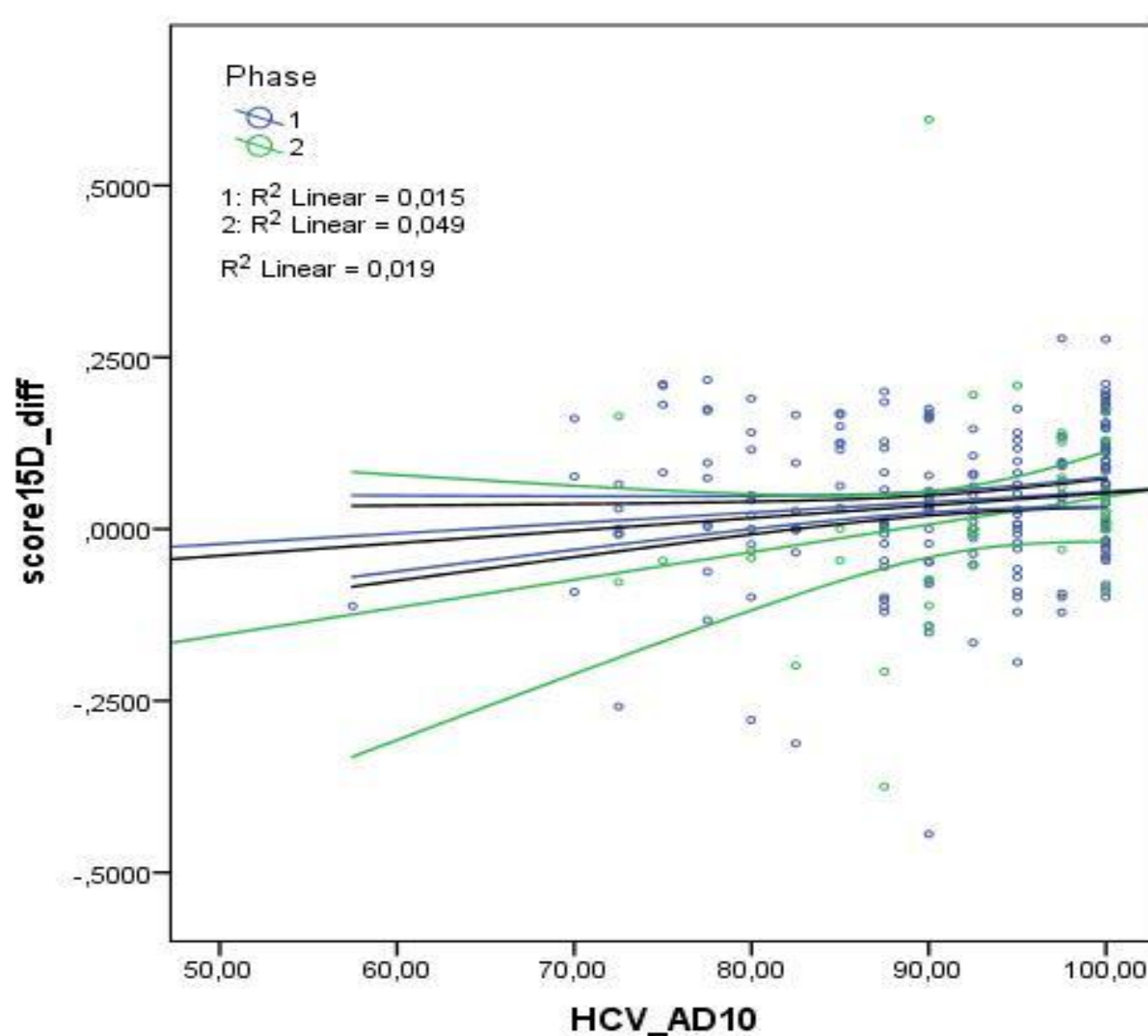
- The HCV patients had the same characteristics, with no significantly difference between the groups
- The patients treated with ledipasvir/sofosbuvir from Group 1 had decompensated cirrhosis, with higher values for severity and lower values for HRQoL at baseline, as we can see for Score 15D_1.
- Even if the HRQoL was lower in Group 1 at baseline, the HRQoL increased to achieve almost the same values at the end of treatment.
- No HRQoL differences were observed at the end of the treatment between the two groups of patients.

Conclusion

Our study reveals a significant increase of HRQoL after DAAs treatment also regarding some dimensions (sleeping, excretion, usual activities, mentality, discomfort, depression, distress, vitality, sexual activity).

Using HCV-AD10, we were able to find high DAAs adherence with no differences between the type of treatment. Enhancing depression and distress were the only factors that increased medication adherence.

Despite a high level of adherence and a significant increase of HRQoL after DAAs treatment, no correlations were found between the cure rate and adherence or HRQoL.



➤ Low positive correlations were observed between the enhancing of HRQoL and DAA-adherence for neither of the groups (Spearman's rho = 0.157, p-value=0.015)

➤ Low positive correlations were observed between HRQoL at the end of the treatment and DAA-adherence for neither of the groups (Spearman's rho = 0.176, p-value=0.006)