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Involvement of Primary Care Providers in Chronic Hepatitis C Treatment

New Guideline Focuses on Chronic Hepatitis C Treatment in Primary Care Setting

The efficacy of direct-acting antiviral agents, which have a cure rate of 94%-98% in patients with chronic hepatitis C is well-established. Despite the availability of abundant and safe oral treatment options, only 9% of American patients with hepatitis C infection have been treated successfully. There has been also been a recent uptick in acute hepatitis C infections, likely driven by the opioid epidemic.¹

The New York Department of Health AIDS Institute guideline was put forth with the aim to guide primary care providers (PCPs) and others in managing hepatitis C.² The guidelines provide a roadmap for pre-treatment assessment, monitoring during therapy, and follow-up. They also clarify when a patient needs to be treated by a specialist, rather than by a PCP, and present DAA options, categorized based on the viral genotype and FDA-approved combination therapies.

Given the rapid rise in acute hepatitis C incidence in the younger population over the last few years and the lack of hepatitis C care specialists, the guidelines provide an important and timely tool for PCPs and specialists in treating CHC patients.¹

References

1. <https://www.medscape.com/viewarticle/891213>. Accessed January 2018.
2. <https://www.hivguidelines.org/hcv-infection/treatment-with-daa/>. Accessed January 2018.