HEALTH UTILITIES IN CHRONIC HEPATITIS C PATIENTS ONE YEAR AFTER SUCCESSFUL TREATMENT WITH DIRECT-ACTING ANTIVIRALS

A05 - Bile and liver therapy

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Objective

To assess the change in health utility values for patients cured of hepatitis C virus infection, one year after successful treatment with direct-acting antivirals (DAAs), and the variables associated to that change.

Methods

Observational, prospective study included cured patients with oral direct-acting antivirals between May 2016 and April 2017.

Baseline and Post-48 utility

Differences in medians compared by Wilcoxon-test

% Disutility reduction=(post48 – baseline)/(1-baseline) * 100

Multivariable linear regression analysis adjusting by sex, age, HIV, baseline mobility limitation, anxiety-depression and liver fibrosis before treatment.

Results

199 patients included; 65% male, 32% HIV co-infected and 29% cirrhotic (F4)

<table>
<thead>
<tr>
<th></th>
<th>Median baseline utility</th>
<th>Median post-48 utility</th>
<th>Median difference</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Global (n=199)</td>
<td>0.857</td>
<td>0.932</td>
<td>+0.075</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>HCV/HIV co-infected (n=63)</td>
<td>0.871</td>
<td>0.932</td>
<td>+0.061</td>
<td>0.001</td>
</tr>
<tr>
<td>F0-F1 (n=48)</td>
<td>0.901</td>
<td>0.932</td>
<td>+0.031</td>
<td>0.051</td>
</tr>
<tr>
<td>F2-F3 (n=93)</td>
<td>0.857</td>
<td>1.000</td>
<td>+0.143</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>F4 (n=58)</td>
<td>0.809</td>
<td>0.890</td>
<td>+0.081</td>
<td>&lt;0.001</td>
</tr>
</tbody>
</table>

Moderate-advanced fibrosis (F2-F3) and cirrhosis (F4) were associated with higher utility improvement than those with lower fibrosis degree (β=0.06; 95%CI,0.001 to 0.12 and β=0.07; 95%CI, 0.003 to 0.13, respectively)

Conclusions

A long-term improvement in health utilities occurs in chronic hepatitis C patients successfully treated with DAAs, even in HCV/HIV co-infected. This benefit is especially evident in patients with advanced fibrosis. Availability of utility values obtained directly from patients contributes to future economic evaluations of these new drugs.

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