

Homeless People Have a Greater Risk for Hepatitis C Reinfection

Recent drug use along with unstable housing increased the risk of acquiring HCV again.

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People experiencing homelessness or unstable housing are at greater risk for reinfection with hepatitis C virus (HCV), according to study results published in [Clinical Infectious Diseases](#).

People who lack stable housing are more likely to initially acquire [hepatitis C](#) compared with those who are housed. HCV is readily cured with [direct-acting antiviral therapy](#), but prior infection does not confer long-lasting immunity, and it is possible to get the virus again.

Tracking reinfection after successful treatment is an important step in the cascade of care.

Marguerite Beiser, NP, of the Boston Health Care for the Homeless Program, and colleagues examined the risk for HCV reinfection among people experiencing homelessness who were treated for a prior infection.

The researchers recruited people receiving hepatitis C treatment through the program between 2014—the year direct-acting antivirals became available—and 2020. Successful treatment was defined as sustained virologic response (SVR), or an undetectable viral load 12 weeks after completing treatment. Reinfection was assumed if an individual tested positive for a different HCV genotype at 12 weeks posttreatment or had any recurrence following SVR.

The study population included 535 people, 81% of whom were men; the median age was 49 years. Most (70%) were experiencing homelessness or were unstably housed when hepatitis C treatment began.

A total of 74 cases of reinfection were observed, including five people who were reinfected twice. Across the study population, the rate of HCV reinfection was 12.0 per 100 person-years. But this rose to 14.6 cases per 100 person-years among people experiencing homelessness and to 18.9 cases per 100 person-years among people with unstable housing.

After adjusting for other factors, homelessness and drug use within six months prior to treatment were linked to a greater risk for HCV reinfection. The reinfection rate rose to 25 cases per 100 person-years for people who were both homeless or unstably housed and had recently used drugs.

“We found high HCV reinfection rates in a homeless-experienced population, with increased risk among those homeless at treatment,” wrote the researchers. “Tailored strategies to address the individual and systems factors impacting marginalized populations are required to prevent HCV reinfection and to enhance engagement in posttreatment HCV care.”

Click here to read the study in [Clinical Infectious Diseases](#).

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