



Telemedicine Led to Higher Hepatitis C Cure Rate for People With Opioid Use Disorder

People who received antiviral treatment via telehealth were nearly three times more likely to be cured than those given off-site referrals.

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Facilitated telemedicine within opioid treatment programs helped more people with [hepatitis C](#) achieve a cure, limited reinfections and promoted drug use discontinuation, according to study findings published in [JAMA](#). Results were previously reported at the 2023 Liver Meeting.

“Facilitated telemedicine integrated into opioid treatment programs resulted in significantly higher cure rates, with significant reductions in illicit drug use and minimal reinfections,” the study authors wrote. “[F]acilitated telemedicine increases hepatitis C treatment access for underserved populations.”

People with opioid use disorder are at high risk for acquiring hepatitis C virus (HCV) via shared injection equipment. Studies have shown that [direct-acting antiviral therapy](#) can be highly effective for people who use drugs, but this population can face stigma and discrimination when seeking healthcare.

Andrew Talal, MD, MPH, of the University at Buffalo, and colleagues conducted a study to compare HCV cure rates among people in opioid treatment programs who received either facilitated telemedicine or off-site referrals ([NCT02933970](#)). Standard care involves off-site referral to a hepatitis specialist, while in facilitated telemedicine, a program staff member acts as a liaison between a client and an off-site hepatitis specialist.

For the study, the researchers recruited 602 people with hepatitis C at 12 opioid treatment programs across New York State between March 2017 and February 2020. All 12 programs began with off-site referral, and four randomly selected sites transitioned to facilitated telemedicine every nine months.

About 60% of the participants were men, half were white and the average age was approximately 48 years. Of these, 290 received facilitated telemedicine while 312 received off-site care. More than 90% in the telemedicine group started antiviral treatment, compared with just 40% in the off-

site referral group.

Likewise, the odds of being cured were more than twice as higher in the telemedicine group: 90% of those receiving telemedicine were successfully treated, compared to 39% of those referred off-site. Participants in both groups reported being satisfied with their care delivery. What's more, illicit drug use dropped off among those who were cured, and there were few HCV reinfections.

The integration of hepatitis C care within opioid treatment programs as well as an established rapport between participants and program staff members likely led to better clinical outcomes, the researchers suggested.

"Telemedicine leads to high patient retention in care and cure within this population," Talal said in a [press release](#). "Our findings show that this kind of research can be done in unconventional settings and that leveraging the trust that patients have in these treatment programs can be very helpful."

These results "highlight the power of novel approaches in tackling chronic conditions in underserved populations," added Allison Brashear, MD, dean of the Jacobs School of Medicine and Biomedical Sciences at the University of Buffalo. "The findings pave the way for significant improvements in the lives of participants and offer hope for similar successes in addressing other diseases."

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