

# Social Determinants of Health among People Who Inject Drugs living with Hepatitis C

Luis Gonzalez Corro MD; Nataly Rios Gutierrez BA; Chinazo O. Cunningham MD, MS; Julia Arnsten MD, MPH;

Alain Litwin MD, MPH; Brianna L. Norton, DO, MPH

Montefiore THE UNIVERSITY HOSPITAL

Division of General Internal Medicine

Division of Hospital Medicine

Contact information: luisgonz@montefiore.org



@dr\_luis16

## **BACKGROUND**

- Of the nearly 3 million people living with HCV in the United States alone, the overwhelming majority are among people who inject drugs (PWID), thereby affecting many marginalized and impoverished populations <sup>1</sup>
- Despite direct acting antiviral medications that now cure HCV in over 95% of people in as little as eight weeks with few side effects, the majority of HCV+ PWID in the US remain untreated <sup>2</sup>
- This lack of treatment uptake is likely multifactorial, but may be due to a series of interlocking social, environmental, governmental, institutional and psychological factors, or Social Determinants of Health (SDOH)
- We set out to determine the SDOH impacting a population of HCV+ PWID and determine if these SDOH were related to reduced HCV treatment uptake

## **OBJECTIVES**

- Identify the primary Social Determinants of Health (SDOH) affecting people who inject drugs (PWID) living with chronic Hepatitis C (HCV) infection in the US.
- Understand the relationship between Social
   Determinants of Health and HCV treatment uptake

## REFERENCES

- 1. http://www.ncbi.nlm.nih.gov/pubmed/26171595
- 2. https://pubmed.ncbi.nlm.nih.gov/18165889/



## **DEMOGRAPHICS**

 84 participants enrolled self identified as Black/African American (35%), Hispanic (60%), males (77%), aged 51 (SD11).



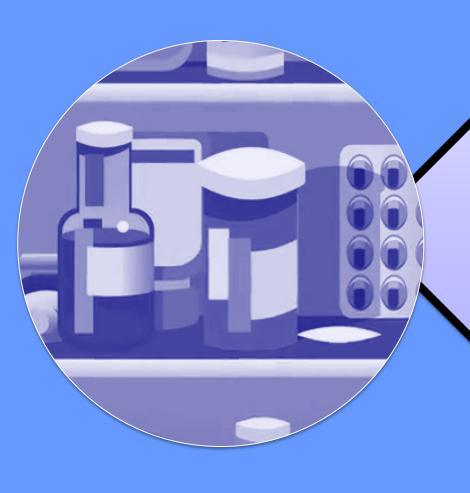
# **FINANCES**

• 42% run out of money for basic needs on a daily or weekly basis, 69% receive food stamps, and 23% are homeless, 48% report not having transportation to get their medical visits



# **EDUCATION / STRUCTURAL**

 Nearly half (45%) of participants have less than a high school education, 57% have ever been incarcerated, and 25% do not trust doctors.



# TREATMENT UPTAKE

 A total of 57% of participants initiated HCV treatment; no specific factors of SDOH were associated with treatment initiation.

#### **METHODS**

- HCV+ PWID were enrolled into an RCT of group vs.
  individual HCV treatment uptake interventions
  within a primary care clinic in the Bronx.
- Data were obtained through participant surveys completed at the baseline study visit.
- We included patient characteristics and baseline SDOH including demographics, finances, educational level, incarceration history and levels of medical distrust
- Bivariate analyses performed between treatment initiation and the various factors of the SDOH
- HCV treatment was provided according national guidelines

### CONCLUSIONS

- HCV+ PWID face overwhelming barriers in the form of poor SDOH
- Despite this, over half of participants initiated HCV treatment
- These numbers serve as proxy for resilience and willingness to engage in care
- Poor SDOH should not be a reason to delay HCV treatment
- It is essential to address the underlying SDOH in this population in order to achieve improved health outcomes