Hepatitis C infections in Opioid-dependent Patients (HepCOP2): What determines the state of care in the canton of Zurich?

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Background: A representative survey in patients on opioid maintenance treatment (OMT) in the canton of Zurich (ZH) revealed that required tests to determine whether antiviral treatment should be offered were not done regularly. Treatment against chronic hepatitis C (CHC) was highly rare. The objective of this study was to identify patients', physicians' and institutional characteristics associated with an appropriate diagnostic work-up of these patients.

Methods: The survey included a representative sample of all patients on OMT in ZH. We developed a questionnaire to collect information from patients' charts (demographic data, laboratory tests, antiviral treatment) and used a validated questionnaire to gather information on physicians' attitudes. Multiple regression analysis was applied. A bootstrap-stepwise selection method was used in order to identify the most important factors influencing adequate diagnostic work-up.

Results: 63 physicians or institutions (18% of OMT providers in ZH) participated in this study. They care for 1575 patients, which represents 43 % of all patients on OMT in ZH. 279 patient's charts were analyzed. 67 patients had an inadequate diagnostic work-up. Physicians without own laboratory facilities (OR=4.17, p<0.01), referring their clients for primary somatic care (OR=2.19, p=0.01), and physicians with an abstinence oriented attitude (OR=1.42, p<0.01) or refusing illicit heroin consumers (OR=1.55, p<0.01) were more likely to work-up patients inadequately. Patient characteristics (job, housing, alcohol consumption) had only a small impact on adequate testing.

Conclusions: For adequate diagnostic work-up attitudes of physicians and office infrastructure are of higher importance than individual characteristics of the patients. Measures to improve adequate testing for HCV and the rate of CHC treatment are necessary.