

Treating hepatitis C infection in prison is good public policy

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Incarcerated patients with chronic hepatitis C virus Results show that 61 percent of non-incarcerated (HCV) infection are just as likely to respond to treatment for the disease as patients in the community, according to findings published in the October issue of Hepatology, a peer-reviewed journal of the American Association for the Study of Liver Diseases. The study from the University of Wisconsin School of Medicine and Public Health (SMPH) in Madison found that HCV patients in prison were just as likely to achieve a sustained viral response (SVR) as non-incarcerated patients.

Medical evidence reports that chronic HCV is the leading cause of end-stage liver disease (ESLD) and liver disease mortality in the U.S. Further studies have shown the risk of developing cirrhosis due to chronic HCV ranges between 5 and 25 percent over a 25 to 30 year period. Consequences caused by chronic HCV are major public health concerns within the U.S. prison system, with research conducted by the Centers for Disease Control and Prevention (CDC) estimating up to 31 percent of U.S. inmates have chronic HCV, compared to just two percent of the general population in this country.

"Given that a history of intravenous drug use is more frequent among inmates, there is a higher prevalence of HCV infection in the prison population," explains lead author Dr. Michael Lucey, Chief of the Division of Gastroenterology and Hepatology at the SMPH. "HCV treatment during incarceration provides an opportunity to make a significant improvement to public health."

Incarcerated and non-incarcerated patients with HCV who were seen at the University of Wisconsin Hepatology or Infectious Diseases Clinic between January 2002 and December 2007, were evaluated for antiviral therapy. Researchers identified 521 general-population patients and 388 from the prison population who were evaluated for HCV therapy.

and 60 percent of incarcerated patients received treatment with pegylated interferon and ribavirin. Those from the prison population were more likely to be African-American males with a history of alcohol or intravenous drug use. The team reported that SVR was achieved in 43 percent of prisoners compared to 38 percent of patients in the generalpopulation group.

"Our findings highlight the effectiveness of antiviral therapy in HCV-infected prisoners, and show that it is as successful as treatment for HCV patients in the general population," concludes Dr. Lucey. "With previous studies citing poor results of HCV treatment in high-risk groups on an outpatient basis, a correctional setting may be an optimal setting for treatment that will help curb the hepatitis C public health crisis."

More information: "Comparison of Hepatitis C Virus Treatment Between Incarcerated and Community Patients." John P. Rice, David Burnett, Helena Tsotsis, Mary J. Lindstrom, Daniel D. Cornett, Patricia Voermans, Jill Sawyer, Rob Striker and Michael R. Lucey. Hepatology; DOI: 10.1002/hep.25770; Print Issue Date: October, 2012.

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