

Prospective data on people who use drugs in Switzerland: the SAMMSU cohort

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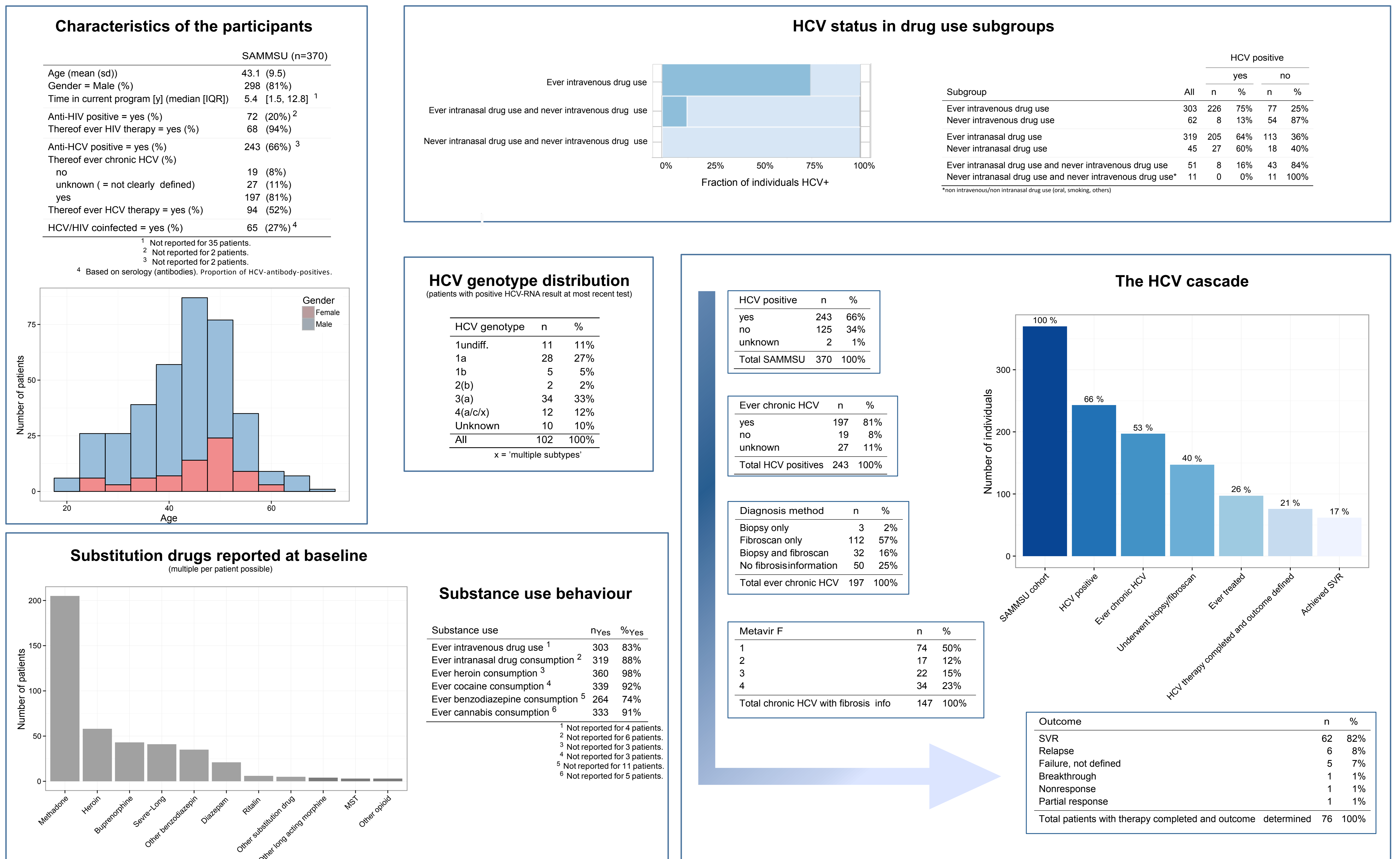
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Background

The aim of the Swiss Association for the Medical Management in Substance Users (SAMMSU) is to improve medical management of people who use drugs (PWUD) in Switzerland. Since data on behaviour, treatment and outcome of PWUD is scarce, a new nationwide cohort study of PWUD in Switzerland was established.

Methods

The SAMMSU cohort is an ongoing, prospective, open cohort of PWUD. Data collection started in late 2014. Inclusion criteria are: to be or have been on opioid substitution and to be at least 18 years old. Data are collected annually with a wide list of key parameters including demographical and socio-economical variables, drug and alcohol use, psychiatric and somatic comorbidities and therapies. Special attention is given to HCV management and treatment.



Results

As of September 2016, 370 subjects were enrolled into the cohort. Mean age was 43 years, 81% were males. Opioid substitution was in the majority of the subjects methadone, followed by heroin, buprenorphine, morphine and others. Seventy-two subjects were HIV positive (20%), of whom 68 (94%) received HIV treatment and 65 (90%) were HIV/HCV coinfectd. HCV-antibodies were screened in 99% of the enrolled subjects (368/370) and HCV-Ab prevalence was 66% (243/368). HCV-RNA was tested in 216 HCV-Ab positive subjects (89%) and resulted positive in 197 (81%). Among those with positive HCV-RNA, 147 subjects (75%) had a liver fibrosis assessment, of whom 74 (50%) had stage F0/F1, 17 (12%) had stage F2, 22 (15%) had stage F3 and 34 (23%) had stage F4. Ninety-seven subjects received a treatment for HCV, resulting in a treatment uptake of 49%. Of 76 HCV completed treatments with documented follow-up, 62 (82%) resulted in a sustained virological response (SVR). Concerning HCV genotype, the result was available for 102 subjects with positive HCV-RNA at most recent test: 44 subjects were GT1 (43%), 2 were GT2 (2%), 34 were GT3 (33%), 12 were GT4 (12%). In 10 subjects genotype was unknown.

Summary

In our drug substitution setting, with 83% previous intravenous drug use and 99% HCV-screening coverage, HCV-prevalence was two thirds with a 81% chronification and a 27% HIV-coinfection rate. HCV treatment uptake was nearly 50%. The SVR rate was as high as 82% for those with completed treatment and documented outcome. For 75% of patients with chronic HCV, fibrosis staging was available (mainly determined by fibroscan). 50% had significant fibrosis (>=Metavir F2) qualifying for reimbursement of interferon-free treatment in Switzerland. Among those still in need of treatment (currently HCV-RNA positive), genotype 1 and 3 are the most frequent genotypes.