

DIFFERENCES IN BASELINE CHARACTERISTICS OF DIRECT ACTING ANTIVIRAL (DAA)-TREATED GREEK HCV PATIENTS ACCORDING TO SOURCE OF INFECTION

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Poster

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A Greek national registry study of 930 DAA-treated HCV patients found that those with no history of drug use were older, had higher rates of metabolic comorbidities and decompensated liver disease, and experienced more treatment-related adverse events compared to people with history of drug use.

KEY POINTS

- Among 930 patients treated with DAAs between 2015 and 2024, 56.8% had a history of drug use while 43.2% were infected through other routes.
- Patients with no drug use history were significantly older (mean 56.9 vs 47.1 years), had higher BMI (26.4 vs 24.4 kg/m²), and more frequently had diabetes (13.6% vs 2.7%), hypertension (10.7% vs 8.8%), and decompensated liver disease (13.5% vs 6.1%).
- Transient elastography measurements were higher in the non-drug use group (13.9 vs 10.9 kPa), though APRI scores did not differ between groups.
- Patients with drug use history were more often infected with genotype 3 (64% vs 30%), while those without drug use history experienced more adverse events from DAA treatment (3.1% vs 0.7%).
- The authors suggest metabolic syndrome features in non-drug use patients may contribute to greater liver fibrosis and inform treatment selection and follow-up strategies.

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