



NATIONAL DEVELOPMENT AND RESEARCH INSTITUTES, INC.

Fact Sheet

Stop Hepatitis C Project

Fact sheets are brief summaries of findings of recently completed research projects.



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Recommendations/ Lessons Learned

Almost 20% of all program managers mentioned a lack of staff awareness about issues surrounding HCV. The provision of HCV services needs to be more of a priority in drug treatment programs.

Programs indicated that a lack of resources was the primary reason for not implementing more HCV services. Funders need to allocate more resources to incorporate and sustain HCV services.

Community-based prevention providers especially need to target HCV education efforts to smaller programs and programs that are not connected to a larger agency.

Related NDRI Training Institute Courses

The A, B, C's of Hepatitis

Basic Information about Sexually Transmitted Infections

Hepatitis C in Injection Drug Users

To contact the Training Institute and inquire about these trainings and other courses you may call 212-845-4550 or go to our website at www.training.ndri.org

Internet Resources

Hepatitis C Harm Reduction Project:
www.hepcproject.org

Centers for Disease Control and Prevention:
www.cdc.gov/idu/hepatitis

HIV and Hepatitis:
www.hivandhepatitis.com



Services Treatment Organizations Provide for Hepatitis C

Statement of the Problem:

Hepatitis C virus (HCV) is currently the most common blood-borne virus in the United States, especially among drug users. In view of the efficiency with which HCV is transmitted via multi-person use of contaminated injection equipment, injection drug users are at special risk for contracting HCV. Because drug users are frequently underserved medically, drug treatment programs are uniquely situated to provide them with critical HCV services. Currently, however, there is virtually no systematic information about how drug treatment programs are responding to the HCV epidemic.

How was the study conducted?

Drug treatment program staff in approximately 600 programs throughout the country participated in brief telephone interviews. These individuals were asked about HCV services their programs provided in the last year.

Who participated?

Of the 600 participating programs-

1/3 dispensed methadone and 2/3 were drug-free.

Almost all methadone and 1/3 of the drug-free programs were outpatient.

2/3 were part of a network of programs.

1/4 of the drug-free and 1/3 of the methadone programs were private for profit.

Study Findings

	Hepatitis C Service Provision in Methadone Maintenance Treatment Programs	Hepatitis C Service Provision in Drug-Free Treatment Programs
Staff Training		
All of the staff received training on HCV	57%	55%
Basic Hepatitis C Education for Patients		
Programs provided basic education to all of their patients	73%	51%
Testing for Hepatitis C Antibodies		
Program managers were able to estimate the percent of patients that were tested for HCV antibodies through their program	76%	60%
Of these, reported that all of their patients were antibody tested	37%	11%
HCV Medical Monitoring and Management		
Provided referrals to doctors for treatment	99%	86%
Counseled patients to help them maintain their health	96%	88%
Advocated for patients with other medical providers	85%	73%
Monitored patients to make sure that they kept their medical appointments and took their medications	79%	77%
Provided case management to assist patients in receiving proper medical care	76%	66%
Provided support groups for patients who have hepatitis C	30%	12%
Provided treatment by a staff physician	23%	18%