

QUALITATIVE INSIGHTS INTO THE LIVED EXPERIENCE OF INTERFERON-FREE TREATMENTS

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Background: Previous research has focused on the experience of individuals undergoing interferon (IFN) based treatment for hepatitis C (HCV), however qualitative insights into the experience of IFN-free therapy are currently absent from the scientific literature.

Methods: As part of a larger study, a purposive sample of eight individuals participated in face-to-face semi-structured interviews before and after the completion of various IFN-free HCV treatment regimens between June 2015 and March 2016. The interviews were transcribed verbatim and explored using thematic analysis.

Results: Early analysis of the data produced three main themes encompassing the experience of undertaking a course of IFN-free HCV treatment; expectations and realisations, an honour and a pleasure, and treatment needs. Expectations and realisations describes the influence that IFN continued to cast over IFN-free treatment, contrasting the practicalities of taking IFN-free therapy and side-effects experienced with preconceived notions. An honour and a pleasure explores the way participants described a positive and optimistic experience of an undemanding therapy, yet also situated IFN-free treatment as a privilege, associated with feelings of luck and guilt. The final theme, treatment needs, identifies how reassurance and support remain integral to the experience of treatment, illustrating the strategies participants used to search for treatment efficacy, and the value placed on contact with healthcare professionals and other sources of support by those with a significant history of drug use.

Conclusion: As advances in HCV treatment continue apace, a discourse has emerged around alternate ways for 'easier' therapies to be delivered to patients. The results from this study suggest that despite individuals perceiving IFN-free treatments as more straightforward, the concentration and intensity of care given during HCV therapy should not necessarily be scaled back. This has implications for the way services meet the needs of, and offer therapy to, HCV positive substance users in primary care.

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