

New Technologies for Addressing Treatment Barriers and Treatment Adherence

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Substance Users encounter significant barriers to Hepatitis C Virus (HCV) care from medical providers and the health care system due to concern about their ability to successfully adhere to treatment and to avoid reinfection post-treatment. Integrating technology into HCV care and treatment is one strategy that can contribute to overcoming these provider and system barriers. Two web-based resources developed at the Icahn School of Medicine at Mount Sinai in New York City will be presented and their use with substance users discussed. The Psychosocial Readiness Evaluation and Preparation for hepatitis C treatment (PREP-C; prepc.org) is a web-based open-access resource used globally by over 700 health care providers. It promotes a comprehensive assessment of patient readiness for hepatitis C treatment that contextualizes substance use in a larger psychosocial framework. It allows providers to differentiate among subgroups of substance users that require different levels and types of support to succeed on HCV treatment and avoid reinfection post-treatment. HepCure (hepcure.org) is a free, innovative provider and patient education toolkit, which uses web-based and smartphone-enabled resources, navigation, consultation, and support to enhance the quality of care for persons living with HCV. HepCure consists of a Provider dashboard, a Patient app, and a weekly provider tele-education webinar series. HepCure aims to empower patients to play a more active role in their own treatment process, enhance communication, and build trust with their medical provider. The patient app supports patients to (1) find out what treatment options are available to them based on treatment guidelines; (2) assess their own readiness to start treatment and access resources to improve readiness; (3) set medication reminders and track adherence and appointments; (4) record symptoms while on treatment; (5) communicate with their health care provider regarding treatment adherence, symptoms and personal lab data; and (6) access patient resources.