

2018 ANNA NATIONAL SYMPOSIUM

APRIL 15-18 ~ WESTGATE LAS VEGAS RESORT, LAS VEGAS, NV

Direct-Acting Antivirals Treatment Effects for Chronic Hepatitis C Patients with Maintenance Dialysis

Ming-Huang Shih, MSN, RN, Hemodialysis Unit, Changhua Christian Hospital, Taiwan
Feng-Mei Wu, MSN, RN, Hemodialysis Unit, Changhua Christian Hospital, Taiwan
I-Ching Kang, MSN, RN, Nursing department, Changhua Christian Hospital, Taiwan
Chia-Chu Chang, MD, Division of Nephrology, Changhua Christian Hospital, Taiwan
Ping-Fang Chiou, BD, Division of Nephrology, Changhua Christian Hospital, Taiwan

Problem/Purpose: This was a systematic review to determine the effect of direct-acting antivirals (DAAs) for chronic hepatitis C patients with maintenance dialysis.

Sample: The research based from 5 databases. The target population of chronic kidney disease stage 4 or 5, or maintenance dialysis patients who receive direct-acting antivirals with or without interferon therapy.

Methods: We searched for relevant publications and there was no time limitation. These databases included: The Cochrane Library, EBSCO, pubmed, Chinese Electronic Periodical Services (CEPS), and Taiwan Periodical Literature System Database. The studies that met the criteria were assessed using standardized critical-appraisal instruments based on the quality checklist tool of Joanna Briggs Institute. Data was analyzed by: comprehensive meta-analysis software.

Results: After applying inclusion and exclusion criteria, we found that various DAA-based regimens have to match with different genotype which can allow DAA-based regimens more effective and safe. There are six studies (include 170 Asian) available for analysis. The results demonstrated that patient with genotype 1 use DAA-based treatment to improve SVR12/24 rate positive effect (standard mean difference 0.921, 95% CI [0.888, 0.944]).

Conclusions/Nursing Implications: Due to the long-term illness and struggle in life, dialysis patients usually have hard time to make decisions. Therefore, to avoid liver cancer, chronic hepatitis C patients with maintenance dialysis should receive DAA treatment. Unfortunately, there are only some choices and few eligible can get payment in our national health insurance, presently. Nephrology nurses need to be alert and encourage the dialysis patients actively participate in self-management. The medical personnel can provide more information for treatment and to help them share decision making (SDM).

Abstract selected for presentation at ANNA National Symposium, Las Vegas, 2018