

## Implicit bias from providers inhibits hepatitis C treatment in people with HIV, study finds

November 30 2023, by Osman Moneer



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A recent study reveals significant insights into the challenges that can occur for hepatitis C virus (HCV) micro-elimination efforts in people



with HIV (PWH). Due to the opioid epidemic, the prevalence of coinfection with HIV and HCV has been increasing. If left untreated, HCV infection can lead to liver damage, cancer, and death. Although HIV requires lifelong therapy, HCV can be cured with a few months of oral medications.

To understand the barriers in providing hepatitis C care, the authors conducted a mixed-methods analysis that involved conducting focus groups with 14 health care providers across 11 clinics. Practitioners interviewed in the study identified several barriers to micro-elimination, with housing instability, medication nonadherence concerns, and inability to motivate patients being the most prioritized.

Importantly, the researchers found that <u>implicit biases</u> pervaded a majority of the responses offered by providers. As a result, the authors assert that overcoming barriers to treatment may require addressing the stigma health care practitioners can hold toward patients.

The findings are <u>published</u> in the journal *Health Promotion Practice*.

"Given that there are deeply ingrained biases toward people who use drugs, biases that are especially hard to change, we need to instead redesign the way we manage such patients to reduce opportunities for stigma-inducing interactions as we cannot reliably expect every clinician to be absent of implicit bias," said Frederick Altice, MD, MA, professor of medicine (<u>infectious diseases</u>), Yale School of Medicine, and of epidemiology (microbial diseases), Yale School of Public Health.

**More information:** Elizabeth DiDomizio et al, Challenges to Achieving HCV Micro-Elimination in People With HIV in the United States: Provider Perspectives and the Role of Implicit Bias, *Health Promotion Practice* (2023). DOI: 10.1177/15248399231169928



## Provided by Yale University

Citation: Implicit bias from providers inhibits hepatitis C treatment in people with HIV, study finds (2023, November 30) retrieved 8 May 2024 from <a href="https://medicalxpress.com/news/2023-11-implicit-bias-inhibits-hepatitis-treatment.html">https://medicalxpress.com/news/2023-11-implicit-bias-inhibits-hepatitis-treatment.html</a>

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