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Health-related Quality of Life, Psychiatric History, and HIV Comorbidity in Hepatitis C Patients Receiving Antiviral Treatment: a Systematic Review

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Background: The assessment of quality of life (HRQoL) is a significant outcome indicator for patients with chronic diseases and treatments. Chronic hepatitis C is one of world's most important chronic diseases.

Aim: To carry out a systematic review of HRQoL during antiviral treatment with interferon and the new direct-acting antiviral agents (DAA), its baseline risk factors such a psychiatric history and HIV comorbidity, and its relationship with treatment efficacy.

Methods: A protocol based on the PRISMA&CONSORT guides was used. A comprehensive, computerized search (2004-2014) was conducted. Of 314 observational and RCT studies, 24 studies met the inclusion criteria. HRQoL tools used were SF-36 and EQ-5D. Studies showed a moderate to good quality. HRQoL changes from baseline and predictive variables were abstracted, and weighted means (SD) of HRQoL score changes in treatment groups throughout treatment from baseline were analyzed.

Results: HRQoL decreased during any interferon treatment, especially the physical component. The DAA sofosbuvir showed no significant decline in HRQoL. HIV co-infection and a psychiatric history were risk factor for impairment during treatment with interferon. Previous non-responders did not recover in HRQoL to baseline scores at 24 weeks of follow-up. Cohort studies showed impairment 3 times greater than RCTs.

Conclusions: Any antiviral treatment impairs HRQoL. Interferon seems to have more impact than new treatments. Future studies using DAAs should assess HRQoL and its risk factors in depth. Clinicians should attempt a full evaluation of patients before starting treatment, in order to identify risk factors and take preventive measures.

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