

Using Queensland Health notifications data to increase hepatitis C treatment

Authors:

Carpenter M¹, Selvey L¹, Lambert S², Kemp R².

¹School of Public Health, University of Queensland, ²Communicable Diseases Branch, Queensland Health.

Background: This project aimed to maximise treatment in individuals with newly notified hepatitis C virus infection (HCV). HCV is a notifiable condition in Queensland, requiring all positive HCV antibody (HCV-AB) tests to be reported. HCV-RNA testing is used to confirm current infection but may not be initially performed in all cases. We followed-up cases without an HCV-RNA test available on pathology databases with notifying clinicians.

Methods: New notifications from prisons were not followed-up. All follow-up communication was randomised to telephone or email. Evaluation of the seven-month project included analysis of summary statistical data encompassing 1,162 new HCV notifications, and 14 qualitative interviews with clinicians from community and hospital settings.

Results: Of notifications requiring follow-up, 58.6% came from general practitioners (GPs), 20.1% were from hospitals, and 13.9% from Emergency Departments. From these notifications, 31.7% required follow-up with notifying clinicians. When previous treatment, ongoing referral, or patients who had become lost to follow-up were removed from the process, those eligible for advancement to further testing fell to 8.1% (62 cases). From these 62 cases, 29 returned HCV-RNA positive tests, and 26 of these were subsequently prescribed treatment. Telephone contact with GPs was more successful than email, but in a hospital context email was more effective. The qualitative data emphasised various challenges associated with reaching patients who require HCV treatment.

Conclusion: Overall, a small proportion (8.1%) of new notifications that were reported for patients outside the prison system were advanced to HCV-RNA testing, and if necessary treatment. A relatively high proportion of cases were initially tested in hospitals. This highlights the need to implement a more robust system of communicating positive HCV test results from hospital settings to patients' GPs to allow effective progression to treatment. Improved evidence-based methods to engage HCV positive people in care are required.

Disclosure of Interest Statement: This project was funded by the Eliminate Hepatitis C Australia Partnership (EC Australia). EC Australia is a national partnership, funded by the Paul Ramsay Foundation and coordinated by Burnet Institute. The project was implemented by the University of Queensland's School of Public Health and Queensland Health.