Universal Blood-Borne Virus Screening in Patients with Severe Mental Illness managed in an outpatient Clozapine clinic: Uptake and prevalence

Jake Williams¹, Marilyn Barclay², Chester Omana², Sara Buten² and Jeffrey J Post¹,³

1- Department of Infectious Diseases, Prince of Wales Hospital Randwick, NSW, Australia
2- Department of Psychiatry, Prince of Wales Hospital Randwick, NSW, Australia
3- Prince of Wales Clinical School, UNSW, Australia

Hypothesis

Offering screening for BBV infection universally to patients with a severe mental illness enrolled in an outpatient ‘clozapine clinic’ will have a high rate of acceptance and identify new infections

Results

- 164 of 192 patients who attended an appointment were offered testing during the study period
- Of those who were offered testing the uptake was 81.7% (134/164)
- Results were returned from 97 patients within the clinic
- 7 patients were HCV Ab +ve. Of these, 3 patients had a known history of HCV and had completed treatment in the past
- 4 patients were newly identified as having exposure to HCV. 2 of these patients went on to return negative PCR results consistent with spontaneous clearance.
- 2 patients were subsequently found to have chronic HCV infection and were successfully referred for treatment

Summary

- A universal approach to screening for BBV infection has a high rate of uptake in an outpatient cohort of patients with a severe mental illness
- This approach identified previously unknown chronic hepatitis C infections in our cohort

Background

- Patients with a severe mental illness have a higher prevalence of infection with blood-borne viruses (BBVs)
- However, they are less likely to access testing and treatment
- Identifying those at risk for BBV infection in a mental health setting is often challenging
- Previous Australian studies have focused on the inpatient mental health population with varying rates of testing uptake.

Aims

- Offer testing for hepatitis C, hepatitis B and HIV to all patients attending an outpatient clozapine clinic
- Establish the prevalence of BBV infection in a local cohort of patients with a severe mental illness
- Measure the uptake of this program and streamline care pathways for those with BBV infection

Methods

- Over a 6 month period, every patient who attended the clozapine clinic was offered testing for HIV, hepatitis B (HBV) and hepatitis C (HCV)
- Those who declined testing were not re-offered. Clinicians also had discretion not to offer testing if they felt it inappropriate
- Positive HCV antibody results were followed by qualitative PCR. Identified chronic HCV infections were referred for assessment by infectious diseases service

Results

- 226 patients enrolled in clozapine clinic
- 192 patients attended clinic during study period
- 164 patients were offered testing
- 134 patients agreed to be tested
- 97 results available

- 7 HCV Ab +ve
- 0 HIV +ve
- 0 HBV sAg +ve
- 2 HCV PCR +ve
- 5 HCV PCR -ve

- 7 patients felt not appropriate to be tested
- 20 patients attended clinic but were not offered testing
- 30 patients declined to be tested
- 1 patient tested during inpatient admission

Figure 1: Blood borne virus testing uptake and results for patients in the clozapine clinic