

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

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## 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

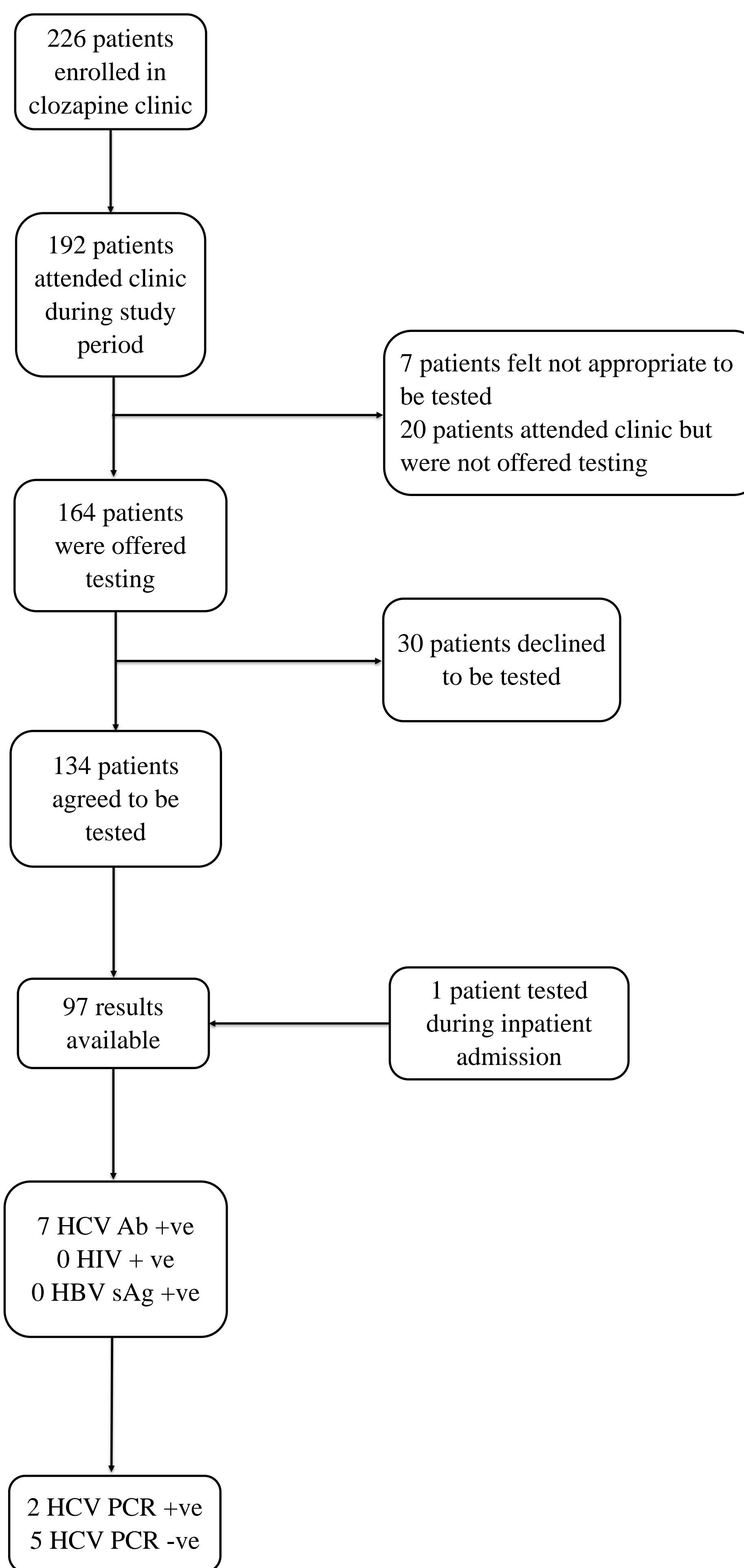


Figure 1: Blood borne virus testing uptake and results for patients in the clozapine clinic

## 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

