Hepatitis C

Re-Engaging Care and Treatment in the North East of Scotland

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Introduction

A significant percentage of patients referred to the Hepatology Service for assessment and treatment for Hepatitis C Virus (HCV) infection have chosen not to engage with services. A large proportion of those who do not engage are people who inject drugs (PWID).

Those previously referred but no longer accessing the Hepatology clinic may not be aware of the advances in the efficacy and side effect profile of the current drug regimens.

Methods

NHS Grampian's HCV database identified patients who are no longer under review, have active HCV and suitable for treatment. Patients who had died or no longer resided in the health board were removed.

The Specialist Nurses first attempt to contact patients was by telephone if they were unsuccessful, then a letter was sent to the patient asking them to get in touch, if after 2 weeks no contact had been made a letter was sent to the GP asking them to re-refer the patient. Any contact attempt and outcome was informed by letter to the GP. Information was provided on the developments in treatments and patients were offered appointments with the service.

Standard letters were produced depending on the patient's circumstances, these were uploaded to the patient's electronic notes, if patients did not respond to the initial contact, and any other clinician who may review them would see that the service was attempting contact. For those who engaged, treatment was offered.

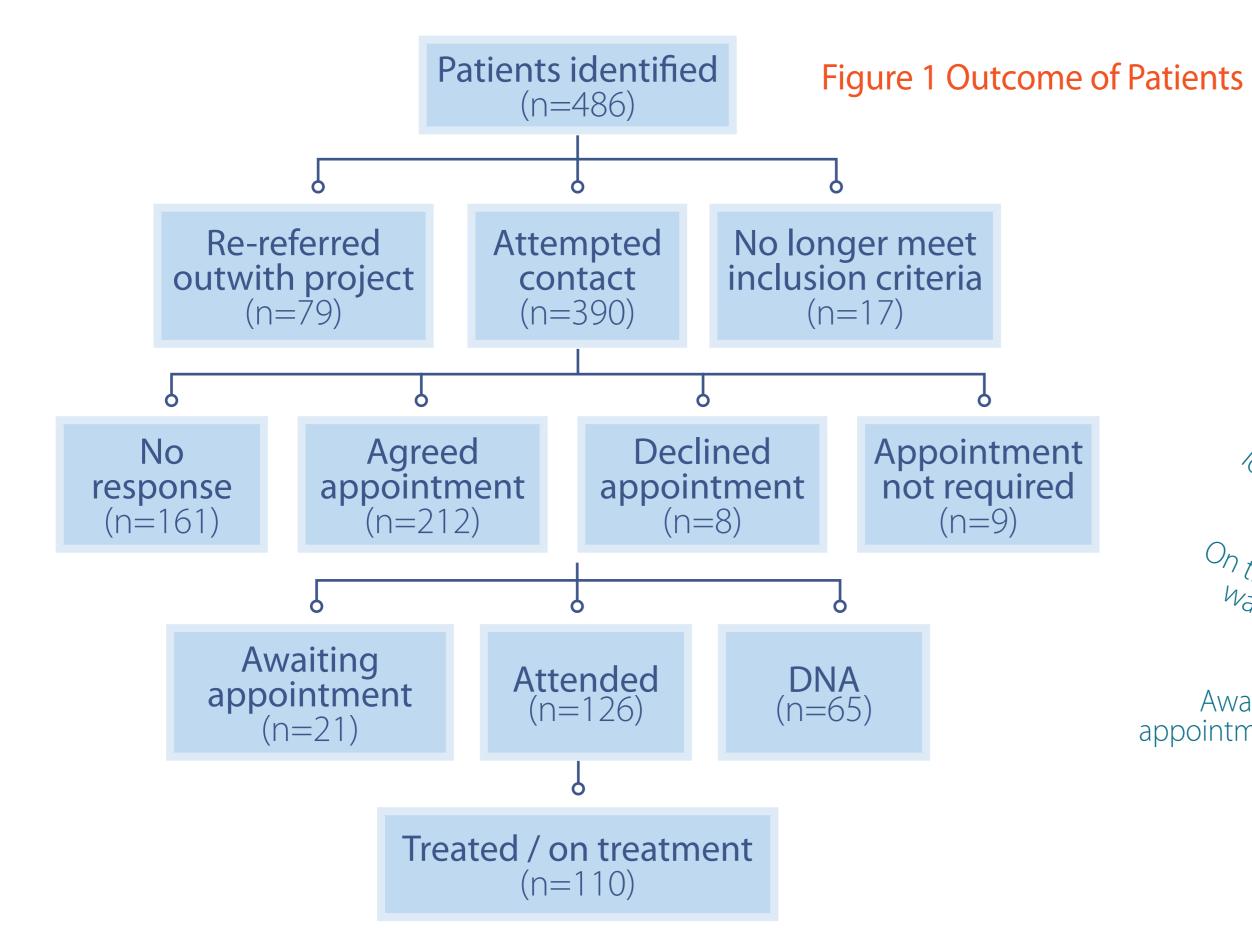
Results

In total, **486** out of **2728** (18%) patients were identified as no longer under follow up.

Of the **486** identified, **454** (93%) patients were PWID, with **249** (53%) known to be prescribed opiate substitution therapy.

Males accounted for **344** (71%), the mean age was 44 years (range 26-84).

Seventeen patients no longer met the inclusion criteria. All patients have been contacted. Figures 1 and 2 below, describe the outcomes.



Of the **212** patients who agreed to attend an appointment, **126** (59%) attended and **110** (87%) were treated or on the waiting list to be treated.

The most effective method of contacting patients and then initiated onto treatment was telephoning patients as can be seen in Figure 3. This was found to be statistically significant (p=0.0002).

On treatment Awaiting appointment Awaiting appointment DNA 16% Treated 23%

Figure 2 Outcome of those patients contacted

Discussion and Conclusion

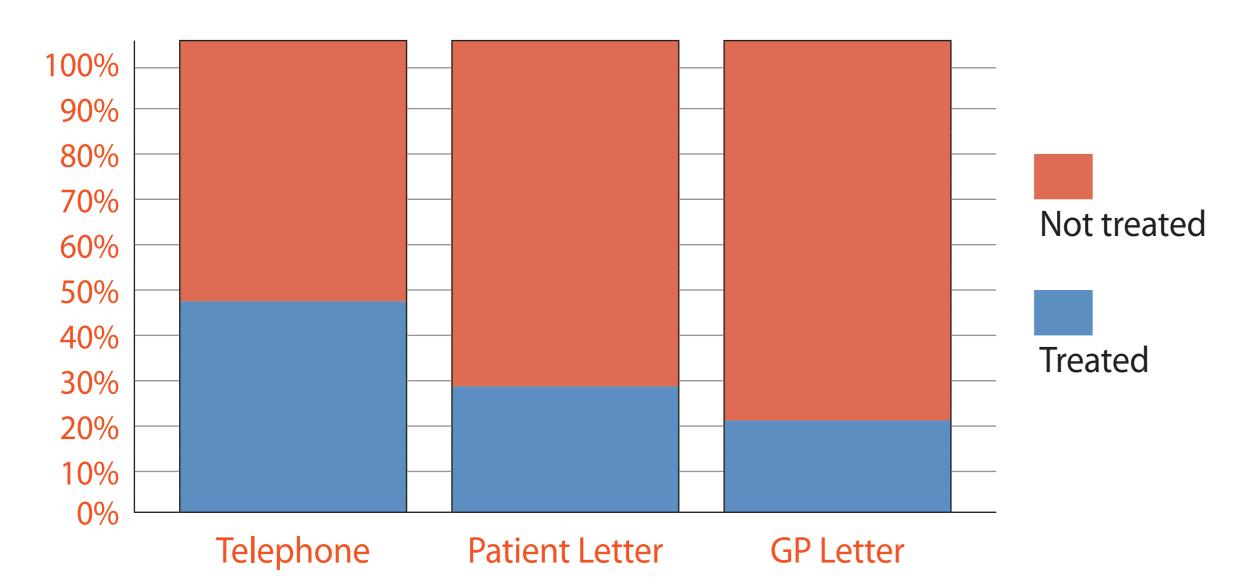
This project has raised awareness of the advances in HCV treatment among PWID, GPs and the wider community.

Patients have been empowered to take control of their own health. Of those who agreed to an appointment, 59% have attended appointments with the hepatology service, with 87% having subsequently received or have been listed for HCV treatment.

Patients have responded positively to the project and appreciative that they have not been forgotten and been given another opportunity, some did not know the referral mechanism and appreciated the contact, making the journey easier.

The most effective method of contacting patients which led to treatment initiations was telephone contact. The project is ongoing, with the results being analysed on a regular basis.

Figure 3 Methods of contacting patients and treatment initiates



Disclosure of Interest Statement:

No interests to disclose

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