



Managed care networks increase HCV testing and referral within community drug services

Jan Tait*, Brian Stephens, Shirley Cleary, Paul McIntyre, John Dillon

*Corresponding author: jantait@nhs.net Dept of Gastroenterology, NHS Tayside, Dundee, United Kingdom

BACKGROUND

With the advent of oral therapies it will be possible in the future to cure virtually all hepatitis c virus (HCV) individuals, however this will only occur if they are tested and offered treatment.

Within the UK the main source of HCV infection is injecting drug use.

In 2004 only 1243 (31%) of our estimated 4000 cases had been diagnosed, 430 referred, 101 started treatment and 52 had achieved a sustained viral response (SVR)

METHODS & MATERIALS

Our centre introduced a managed care network (MCN) involving staff within drug and prison services. We implemented new strategies to improve HCV testing, care and treatment.

We carried out a cohort study on all HCV positive individuals tested between 1994 and 2014

AIM

The aim of the study was to evaluate the effectiveness of this network to determine if changes to care pathways and effective communication between health care professional can improve outcomes

RESULTS

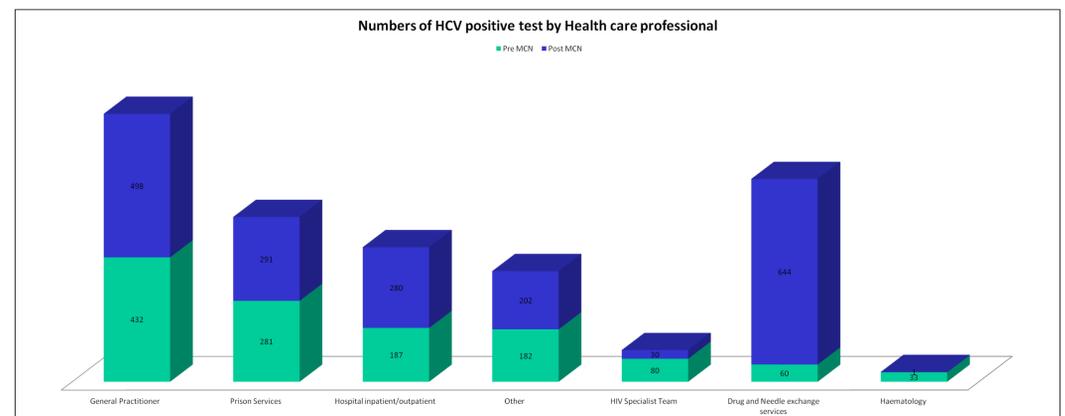
3122 individuals were included in the study. Before the MCN 34.7% of tests and 66% of first referrals were carried out by a General Practitioner.

Only 4.8% (60) of tests and 7.9% (34) of referrals came from drug services. After the introduction of the MCN 34.2(644) of all new tests and 31.5% (429) of first referrals were from drug services. (Graph 1)

At the end of the study 651 were PCR negative, 285 had died, 334 had moved from the area and 24 were not traced.

Of the 1830 remaining 97.5% (1789) were referred and 89% (1629) had accessed care. A total of 872 started treatment(s) and 67.8% (592) have had an SVR

After accessing care 177 died and 181 moved from our area



Graph 1: HCV positive tests by health care professional

CONCLUSIONS

At the end of the study 78% of our estimated HCV positive population had been diagnosed and 40.2% of our total caseload had an SVR. Our data shows that involving staff from drug services within a network can significantly increase HCV testing, diagnosis and treatment and can bring individuals who are perceived as difficult to reach into care