

Australian Research Centre in Sex, Health & Society

Hepatitis C and Ageing A community brief

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Project background

- Australia's population is ageing: 14% aged > 65 years
- ~230,000 Australians live with hepatitis C
 - Hep C-related liver disease is increasing due to the "ageing cohort" - injecting drug use-acquired infection in 1980-90s
 - Older people with hepatitis C often first present to clinical services with cirrhosis, liver failure and/or liver cancer
- Gap in the literature on hepatitis C and ageing
 - We wanted to start the discussion about this issue in a strategic way

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Project background

- Older People Who Inject Drugs (PWID) with hepatitis C are acknowledged in the 4th National Hepatitis C Strategy (p.22) as a priority population

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Project Objectives

- To explore the perspectives of key clinical, community and government stakeholders on hepatitis C and ageing.
- To identify challenges, if any that relate to hepatitis C and ageing in order to inform future research directions.

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Methodology

- Qualitative methodology
 - A purposive recruitment strategy was used to identify key stakeholders in the hepatitis C clinical, community and government sectors.
- Semi-structured interviews were:
 - Conducted either face-to-face or on the telephone
 - Interviews were electronically recorded
- Interview data was analysed using thematic analysis techniques

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Results

- 22 interviews were conducted:
 - Clinical sector (n=8)
 - Medical specialists (n=3), hepatology nurses (n=4) and general practitioner (GP) with hepatitis C interest (n=1)
 - Community sector (n=10)
 - Hepatitis organisation workers (n=8) and drug user organisations (n=2)
 - State government representatives (Vic, SA and QLD)
 - Blood borne virus policy officers (n=3)
 - Ageing sector policy officer (n=1)

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Results

- Variety of definitions of “ageing”:
 - Australian government considers people >65 years to be older
 - The Australian Injecting & Illicit Drug User League (AIVL) describes PWID over 40 years as ageing
 - Study participants considered people with hepatitis C > 55 years as ageing

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Results

- Participants all recognised ageing and hepatitis C as a significant issue that requires further research

Hep C and ageing has not been explored ... hep C is still considered a young person's condition, even though people are hitting their 50's and 60's with advanced disease... (Bureaucrat)

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Results

- Community workers had limited contact with older people with hepatitis C, and therefore, believed they had limited understanding of their needs
- Clinicians reported having contact with some older people with hepatitis C given the (often) urgent need for management of hepatitis C-related morbidity
 - Late presentation to clinical services was identified as an issue

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What's the issue with hep C & ageing?

- Progression of liver disease was universally identified as the issue of greatest concern
- Participants were unclear whether the issue should be:
 - ageing and hepatitis C, or
 - the experiences of people with advanced liver disease, or
 - people who have been living long term with hepatitis C (the effect of duration of infection)
- Each perspective addresses a slightly different population, and emphasises a different subset of questions regarding an individual's needs

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What's the issue with hep C & ageing?

- Is “age” a proxy for “severity of liver disease” or are there specific-age related issues associated with mild liver disease?
 - There are numerous risk factors and co-morbidities that accompany ageing with or without hepatitis C
 - Such as diabetes, cancer, hypertension and high cholesterol
 - Co-morbidities associated with ageing generally and those associated with hepatitis C complicate the management of hepatitis C

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What's the issue with hep C & ageing?

- The hepatitis C clinical environment is changing, with the promise of new treatments which will shorten duration and improve response rates
- Many patients (particularly with co-morbidities) have been advised to wait for the new treatments
- One clinician described their concern about the impact of advising older people to wait for treatment

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What's the issue with hep C & ageing?

Once you reach that age ... there are multiple system changes which will affect the long standing, underlying liver disease ... and that's when we'll be left saying – it's too late to give them the present drugs, it's too late for a transplant and we really missed the boat. (Clinician)

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Aged-care services and hepatitis C

- < 5% of older people in Australia live in residential aged care facilities
- Greater emphasis on keeping people at home supported by home-based aged care services

Aged care staff are often not as well educated as hospital staff and these types of environments often breed breaches of confidentiality, discrimination and lack of privacy. (Community worker)

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Aged-care services and hepatitis C

- Lack of clinical responsibility for older people with hepatitis C
 - No professional/speciality was seen as the leader in caring for older people with hepatitis C
- General Practitioners were identified as the default carer for older people

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Aged-care services and hepatitis C

There is a lack of medical generalists, so the doctors are all siloed and issues such as hep C and ageing are slipping through the cracks. The GP becomes critical in this setting, because they are the only health professional who cares for the patient "holistically," not just systems/organ focused. (Bureaucrat)

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Summary

- Hepatitis C and ageing is being acknowledged as a public health issue in Australia
 - There is an urgent need for epidemiological, clinical and social research on hepatitis C and ageing to support advocacy efforts
- An issue that requires further clarification is distinguishing between the impact of ageing and duration of infection
 - Are there issues associated with hepatitis C and ageing in the setting of mild liver disease?

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Summary

- The insight of older people living with hepatitis C is needed to inform a broader, more insightful understanding of this issue.
- We need to understand the context in which older people with hepatitis C are living, and the support networks and strategies that already exist in order to be able to connect them.

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