YES WE CAN!!!
Optimising Treatment and Management of Chronic Hepatitis B Based on a Disease Registry

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Introduction & Aim

Liver Cancer Incidence in New South Wales
Migrants 1991 to 2001

Cancer Epidemiology Research Unit
The Cancer Council NSW

Vietnam
HK/ Macau
Korea
Indonesia
China
Egypt
Philippines
Italy
Australia

77,000
13,000
14,000
B positive program (Nov/2008- Sep/2016)

- Enhance case detection
- Improve disease monitoring
- Raise CHB awareness
Distribution of participants by country of birth

- Australia
- Other
- Pacific Island
- Not recorded
- Other Asian countries
- Vietnam
- China/HongKong/Taiwan

Number of participants
Patients demographic

Gender distribution

Distribution of age group (year-old)

Male
Female

Number of participants

<=34 35-50 >50

Number of participants
# Chronic Hepatitis B Disease Stage

<table>
<thead>
<tr>
<th>Category</th>
<th>Blood test parameter levels</th>
<th>Management</th>
</tr>
</thead>
</table>
| Yellow Routine surveillance     | VL <2,000IU/L  
ALT <45 IU/L (men)  
ALT <30 IU/L (women) | Monitor every 6 months  
Low risk of progression to advance liver disease |
| Orange Enhanced surveillance    | VL >2,000IU/L  
ALT <45 IU/L (men)  
ALT <30 IU/L (women) | Monitor every 6 months  
Low risk of progression to advance liver disease |
| Red Specialist assessment       | VL >2,000IU/L  
ALT >45 IU/L (men)  
ALT >30 IU/L (women) | Refer for consideration of treatment  
At risk of progression to cirrhosis and HCC. |
| Purple Specialist assessment    | VL <2,000IU/L  
ALT >45 IU/L (men)  
ALT >30 IU/L (women) | Refer for consideration of treatment  
At risk of progression to cirrhosis and HCC. |
## Chronic Hepatitis B Disease Stage

<table>
<thead>
<tr>
<th>Category</th>
<th>Total under each category (%)</th>
<th>Referred to specialist (n)</th>
<th>% of referrals observed</th>
<th>% of referrals anticipated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yellow Routine surveillance</td>
<td>653 (57%)</td>
<td>123</td>
<td>19</td>
<td>0</td>
</tr>
<tr>
<td>Orange Enhanced surveillance</td>
<td>238 (21%)</td>
<td>96</td>
<td>40</td>
<td>0</td>
</tr>
<tr>
<td>Red Specialist assessment</td>
<td>120 (10%)</td>
<td>68</td>
<td>57</td>
<td>100</td>
</tr>
<tr>
<td>Purple Specialist assessment</td>
<td>138 (12%)</td>
<td>24</td>
<td>17</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>1149</td>
<td>311</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Conclusion

• Still need for increasing Hepatitis B awareness

• Hepatitis B programs should offer
  – Simple management algorithm
  – Integration CHB care into a chronic disease model
Thank you