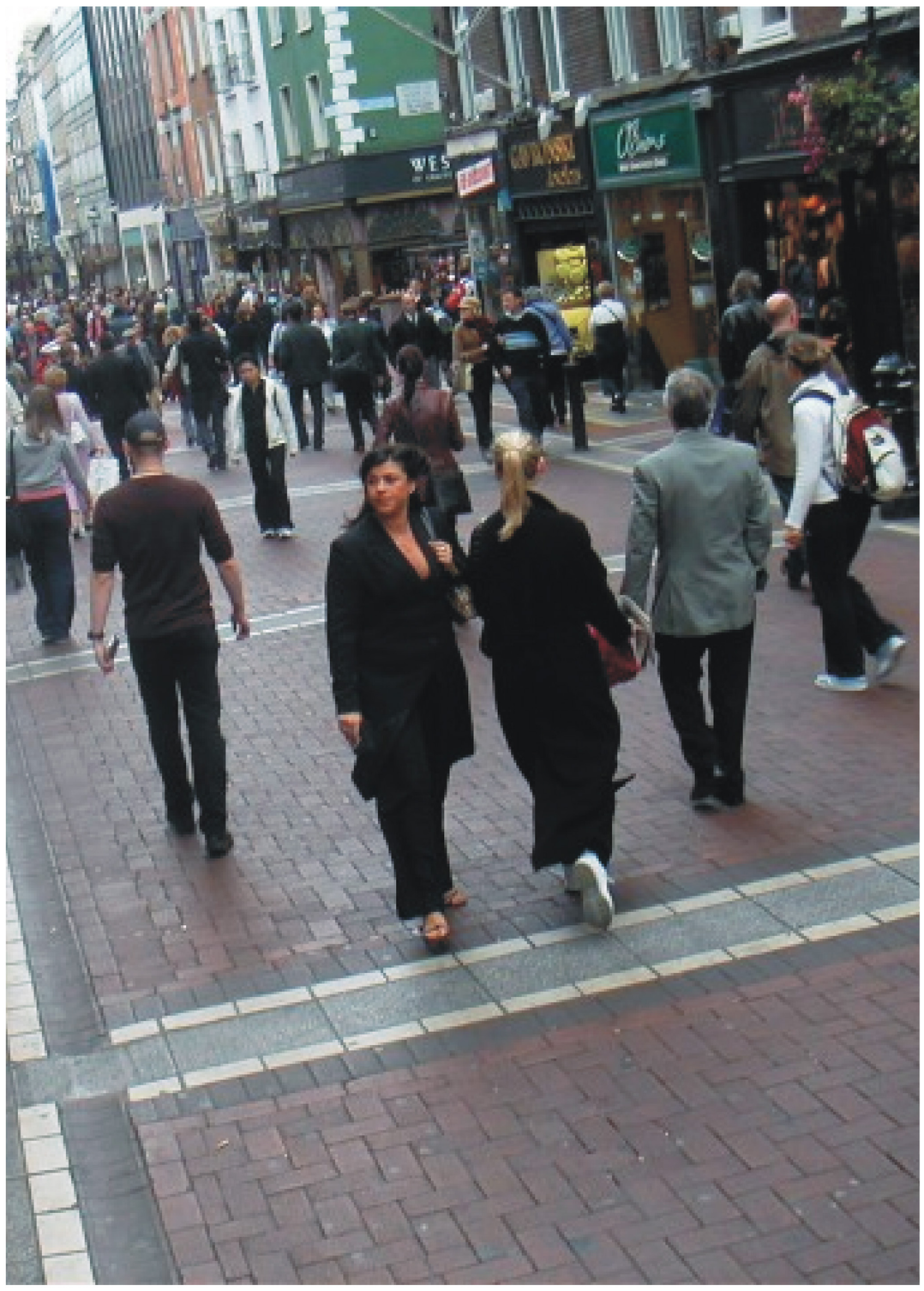
Can Dried Blood Spot Testing for Hepatitis C in Community Pharmacy Increase Uptake?

Radley A[1]
Tait J[1]
Stephens B[1]
Dillon J[1,2]
NHS Tayside[1]
University of Dundee[2]

Interim report of a quasi-experimental study

Introduction

Within Tayside, recent audit demonstrated uptake of testing for Hepatitis C (HCV) was approximately 2.5% of the estimated population at risk per annum. Established routes of testing include general practice; secondary care; specialist drug services; third sector organisations.



Pilots of pharmacies offering dried blood spot testing (DBST) have demonstrated feasibility. This study aimed compared uptake of testing in pharmacies offering DBST with the uptake of testing from established routes of access, in a population receiving opioid replacement therapy (ORT).

Disclosure of Interest Statement
The authors gratefully acknowledge the support given to this study through a Gilead Research Fellowship

Methods

A quasi-experimental study design compared non-randomly chosen intervention and control groups for uptake of DBST. Staff from 6 community pharmacies in Dundee tested consenting eligible patients during the last quarter of 2014.

The primary outcome measure for the study was the proportion of ORT service users accessing testing during 2014. Uptake was compared for patients accessing DBST in the community pharmacies, compared to service users accessing HCV testing from any other service, for the 12 months of 2014.

Results

1,339 patients were prescribed ORT in Dundee: 561 had no record of testing for HCV. During the test period, 43 of 143 eligible patients from the 6 community pharmacies accepted a DBST. Within the 561 eligible patients taking ORT across the whole of Dundee City, a total of 75 patients were tested for HCV (30% Vs 13%). The OR for increased uptake of testing within the 6 pharmacies was 3.93 (95% CI 2.39 to 6.45, Z statistic = 5.41 p= <0.0001). The results from the DBST taken by the pharmacies identified 12 patients with a reactive test.

Conclusion

A far greater proportion of ORT service users accessed DBST from a pharmacy, compared to a wide range of providers, over a longer time period. This study indicates that DBST from community pharmacies is both feasible and effective.