UTILISING THE PATIENT SEARCH TOOL TO FIND PEOPLE WITH UNTREATED HEPATITIS C IN PRIMARY CARE

Authors:
Hansford L[1], Sembhi K[2,] Ni'Man M[3,] Wilson W[4], Gardner K[4], Wright M[4]

[1] Inclusion part of Midlands Partnership NHS Foundation Trust, [2] Merck Sharp & Dohme (UK) Limited (MSD), [3] South Coast Medical Group, [4] University Hospital Southampton

Background: UKHSA reports estimates there are still around 90,000 people living with untreated and/or undiagnosed HCV in the UK. These may be people with historic risk factors who are no longer engaged with drug treatment services.

MSD in collaboration with NHS England (NHSE) developed Patient Search Identification (PSI) software to search electronic health records in primary care for coded HCV risk factors related to either a confirmed positive diagnosis of HCV or to identify those patients at risk of HCV infection.

Description of model of care/intervention: The model of care sought to combine initiatives to find people with untreated HCV and offer point of care testing and linkage to treatment. An integration approach was developed and tested by holding multi-agency meetings comprising representatives from housing providers, charities, hospitals and substance misuse treatment hubs and primary care within Wessex ODN.

Inclusion deployed the PSI tool and invited patients in for screening. Patient records were updated and in some cases corrected.

Effectiveness: 206 RNA+ patients identified via the PSI tool. The hospital team cross referenced their records and found 89 had evidence of treatment. UKHSA then searched wider treatment records and found a further 9 who had been treated. Patients treated with interferon were screened out and this left 81 patients to engage for confirmatory testing. To date, 4 people have now been treated, one is alcohol dependent and 2 are in long term recovery and they simply did not ever get told they were RNA+. 7 outstanding SVR's have been completed. The work continues.

Conclusion and next steps: The PSI tool has enabled us to identify patients with a positive HCV diagnosis with unknown treatment status. This means that these patients can be identified, tested and treated, reducing the risk of significant liver related disease, liver cancer and associated healthcare costs.