TESTING AND LINKAGE TO CARE FOR VIRAL HEPATITIS IN PATIENTS ADMITTED FOR PSYCHIATRIC CARE

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Background

The estimated prevalence of hepatitis C virus (HCV) and hepatitis B virus (HBV) in Denmark is 0.21 % and 0.3% respectively. Undiagnosed infections is estimated to be 24 % and 7% based on capture-recapture studies. Screening and linkage to care for viral hepatitis in psychiatric patients has not previously been evaluated in Denmark.

Aim

Primary aim: Prevalence of HBV and HCV infection among patients admitted to a psychiatric ward.

Secondary aim: Previous test-uptake in the same population

Methods

From 4/Nov/2022 to 1/June/2023 all patients admitted to the psychiatric ward at Odense University Hospital, Denmark were tested in a pilot study of the feasibility of including hepatitis screening (HBsAg and anti-HCV with reflex testing on same sample if positive) in standard of care. Linkage to care and further tests (genotype and markers of fibrosis) were performed during admission if possible or if discharged prior to diagnosis linked to the Department of Infectious diseases outreach program or outpatient clinic as needed. Patient cohort was subsequently linked to the national registry for hepatitis tests (DANVIR) to establish previous test and coverage and validate new diagnoses.

Results

In total 449 consecutive persons were tested in the study period (Table 1). Eight diagnosis of chronic hepatitis were made (1.8%). All diagnosis were new(100%) (Figure 1) . Six patients were linked to care and two were lost to follow-up (see Table 2 and 3 for patient characteristics).

Among the whole cohort 164 (36.5%) had previously ever been tested for HBsAg and 144 (32.0%) for anti-HCV and of those tested 15 (10.4%) had a positive HCV Ab and of these 10 with persistent positive HCV RNA had been treated prior to the study

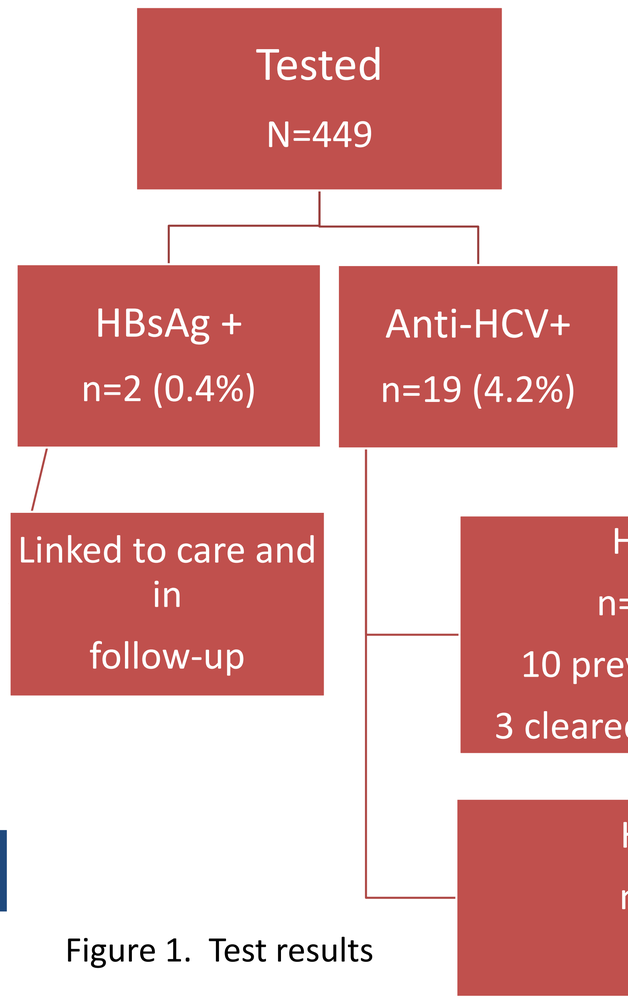

Figure 1. Test results

Cohort	n(%) N=449
Age in years	
<30, n (%)	112 (24.9)
30-39, n (%)	92 (20.5)
40-49, n (%)	74 (16.4)
50-59, n (%)	64 (14.3)
60-69, n (%)	50 (11.1)
70-79, n (%)	33 (7.4)
>80, n (%)	24 (5.4)
Female sex, n (%)	276 (61.5)

Table 1. Study population

		Newly diagnosed	Treatment initiated	Treatment status
1	Male, 36 years	yes	yes	Ongoing treatment
2	Female, 40 years	yes	No	Lost to follow-up
3	Female, 72 years	yes	No	Deferred /Comorbidities
4	Male, 45 years	yes	Yes	Ongoing treatment
5	Female, 70 years	yes	Yes	SVR achieved
6	Male, 40 years	yes	No	Lost to follow-up

Table 2. Outcome HCV infections

		Newly diagnosed	Treatment initiated	
1	Male, 61 years	yes	No	HBeAg negative chronic HBV infecition, no liver disease.
2	Female, 75 years	yes	No	HBeAg negative chronic HBV infecition, no liver disease.

Table 3. Outcome HBV infections

Conclusion

In this pilot study of screening for viral hepatitis we found previously undiagnosed infections in 1.8% of patients, and a high prevalence of exposure to hepatitis C . Linkage to care was succesful in 75% of patients. Only one-third of all were previously tested but diagnosed infections had all been treated or cleared. Screening and linkage to care for viral hepatitis in standard of care for psychiatric in-patients has potential in finding the undiagnosed and is now part of the national recommendations for hepatitis C in Denmark.

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