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

#### **Authors:**

Dröse S<sup>1,4</sup>, Skovmand L<sup>3</sup>, Barkanyi Z<sup>3</sup>, Holm DK<sup>2</sup>, Christensen PB<sup>1,4</sup>, Øvrehus AHL<sup>1,4</sup>

<sup>1</sup>Department of Infectious Diseases, Odense University Hospital, Denmark, <sup>2</sup>Department of Clinical Immunology, Odense University Hospital, Denmark, <sup>3</sup>Department of Psychiatry, Odense University Hospital, Denmark, <sup>4</sup>Department of Clinical research, Faculty of Health Sciences, University of Southern Denmark, Odense, Denmark

## **Background:**

The estimated hepatitis C virus (HCV) prevalence is 0.21 % and for hepatitis B virus (HBV) the prevalence is 0.3% in Denmark. The proportion of undiagnosed HCV patients is 24 % and for HBV 7%. Screening of psychiatric patients in care could be a possible opportunity to find undiagnosed patients, which has been shown in other countries. Aim of the study is to find the prevalence of HBV and HCV infection among patients admitted to a psychiatric ward.

# Methods:

Patients admitted to psychiatric short or long term care between 4/11/2022 to 1/06/2023 at Odense University Hospital will be screened for HBV (HBsAg, anti-HBc and anti-HBs) and HCV (anti-HCV with HCV-RNA reflex testing) infection as a pilot for the feasibility for this approach in standard of care. If patients test positive for either HBsAg or HCV-RNA further blood investigations (genotype, liver transaminases, HIV status) will be performed during hospitalization. Patients will be linked to care at the Department of Infectious Diseases and treatment initiated during their admission in psychiatry.

# **Results:**

300 consecutive persons admitted, were tested in the period November 4th, 2022 until March 16th, 2023. Two patients (0.67%) were positive HBsAg. None of them were aware of their infection. Both were linked to care during hospitalization without need for treatment initiation. Three patients (1%) had a positive HCV RNA of which one was known. One patient had an acute HCV infection with a spontaneous rapid decline in HCV-RNA and he was discharged without treatment for outpatient follow-up. One patient started treatment during hospitalization and one was discharged before the results were available and currently lost to follow up.

## **Conclusion:**

Screening for viral hepatitis as standard of care among patients admitted to a psychiatric ward is a good opportunity to find the undiagnosed and link them to care.

#### **Disclosure of Interest Statement:**

SD has received travel support and speaker fees from Gilead and AbbVie, and research grants from Gilead. PBC has received research grants from Gilead, AbbVie, and MSD. ALHØ has received research grants from Gilead and speaker fees and travel support from Gilead, AbbVie, and MSD. DKH, LS, and ZB have no conflicts of interest.