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Hepatitis Screening

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Hepatitis Screening

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Introduction

Hepatitis C screening is necessary due to the prevalence and risk associated with the infection, yet many people are not being adequately screened, nor are they receiving appropriate follow-up care if they have a positive result.

Why Hepatitis?

- Hepatitis C virus (HCV) is the most common bloodborne pathogen in the United States (Schillie et al., 2020)
- HCV is associated with more deaths than the other top 60 reportable infectious diseases. (Owens et al., 2020)
- 4.1 million people have past or current HCV infections. (Owens et al., 2020)
- Advances in medicine have made it possible to effectively treat and cure HCV with minimal side effects. (Owens et al., 2020)
- HCV can have effects that include chronic fatigue and depression which can negatively impact a patient's health-related quality of life (Younossi et al., 2018)

USPSTF

Recommendations

- Grade B recommendation- Providers should offer or provide the identified service.
- All asymptomatic people aged 18-79 should be tested for HCV once in their lifetime. (Owens et al., 2020)
 - If the patient is at continued risk for HCV they should receive additional periodic screening. (Owens et al., 2020)
 - If positive HCV screening, diagnostic evaluation with non-invasive testing should follow. (Alberts et al., 2022)
 - Treatment typically involves 8-12 weeks of oral antiviral therapy. (Alberts et al., 2022)

Audit Tool

Development

- Designed to answer the question of whether patients who tested positive for HCV received appropriate follow-up testing and treatment.
- Current quality improvement initiative looks at rates of HCV testing, not hepatic fibrosis testing or HCV treatment.
- Did patients receive hepatic fibrosis testing following a positive HCV test?
 - Hepatic fibrosis testing is used to identify the amount of liver damage and to make decisions regarding treatment options (Alberts et al., 2022).
- Did the patient receive HCV treatment?
- Is the patient at increased risk for subsequent infection or reinfection due to risky behaviors?
 - Patients were separated into 2 groups, enrolled in MAT or not enrolled in MAT
- If they are at risk for reinfection, are they offered periodic HCV testing?

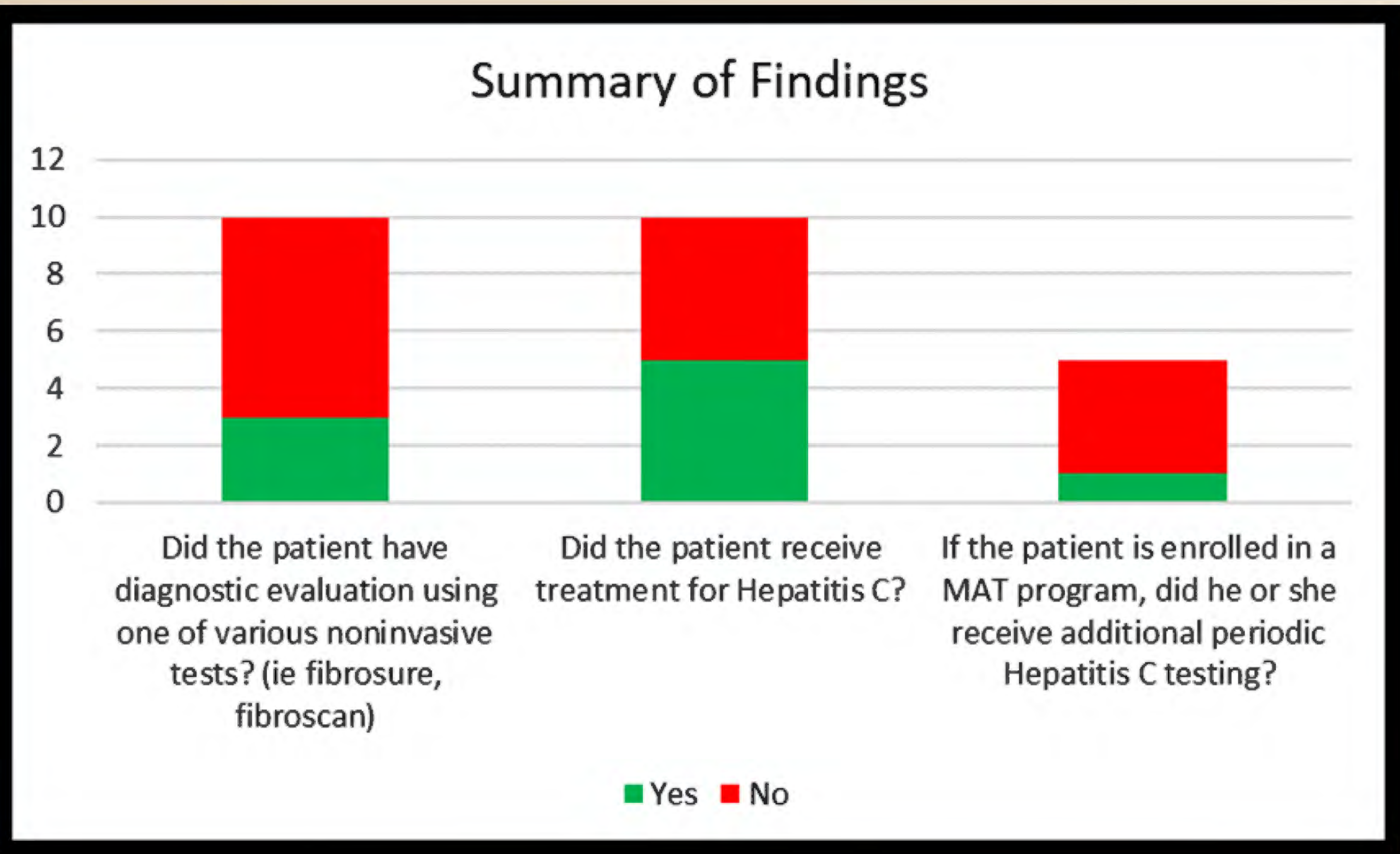
World Health

Organization Goals

The World Health Organization's goal is to end the viral hepatitis epidemic worldwide by the year 2030 by:

- Using evidence-based practices to guide patient treatment.
- Optimizing systems and partnerships to increase access to care.
- Making decisions based on evidence-based guidelines.
- Engaging the community.
- Fostering innovations. (World Health Organization, 2022)

Research Results

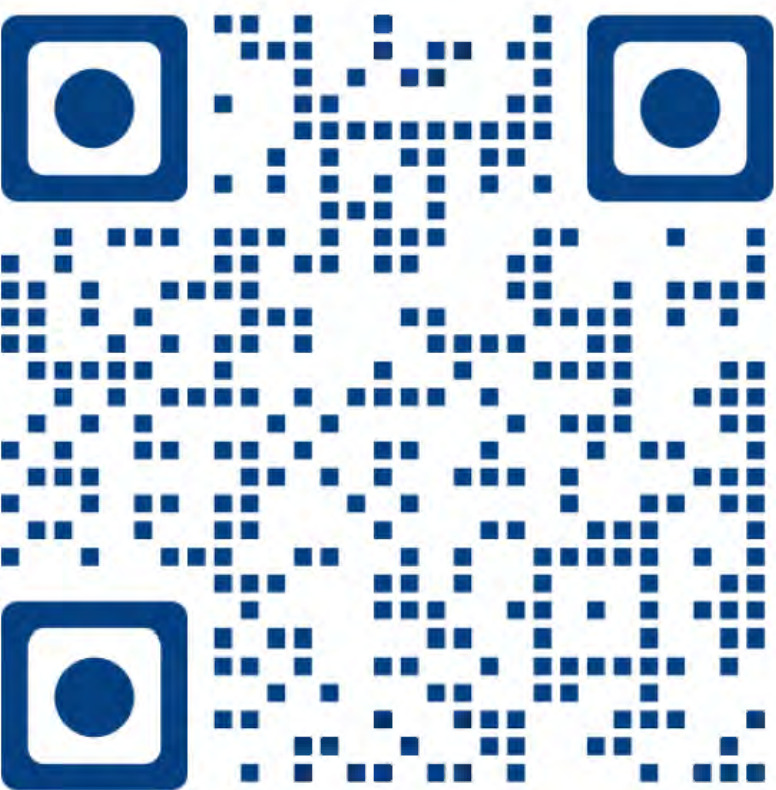


Hepatitis C Diagnosis and Treatment in an FQHC

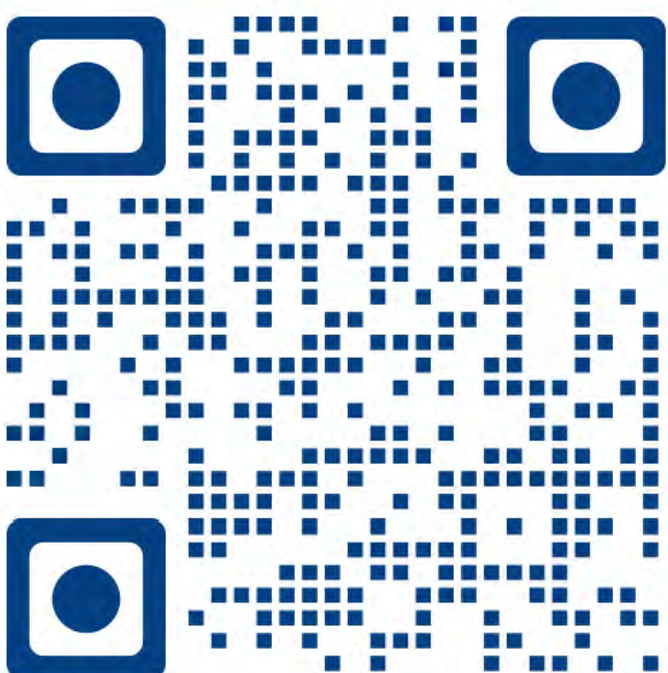
A study conducted by Hachey et al. (2020), looked at the success of hepatitis C treatment in a Federally Qualified Health Center. It found that:

- Of 389 patients identified as having hepatitis C, only 21% (about 81 patients) received appropriate liver fibrosis staging.
- Of 389 patients identified as hepatitis C positive, only 24% (about 93 patients) received a prescription for the treatment of hepatitis C.
- Of 389 patients identified as having hepatitis C, only 19% (about 74 patients) were able to achieve a cure.

References

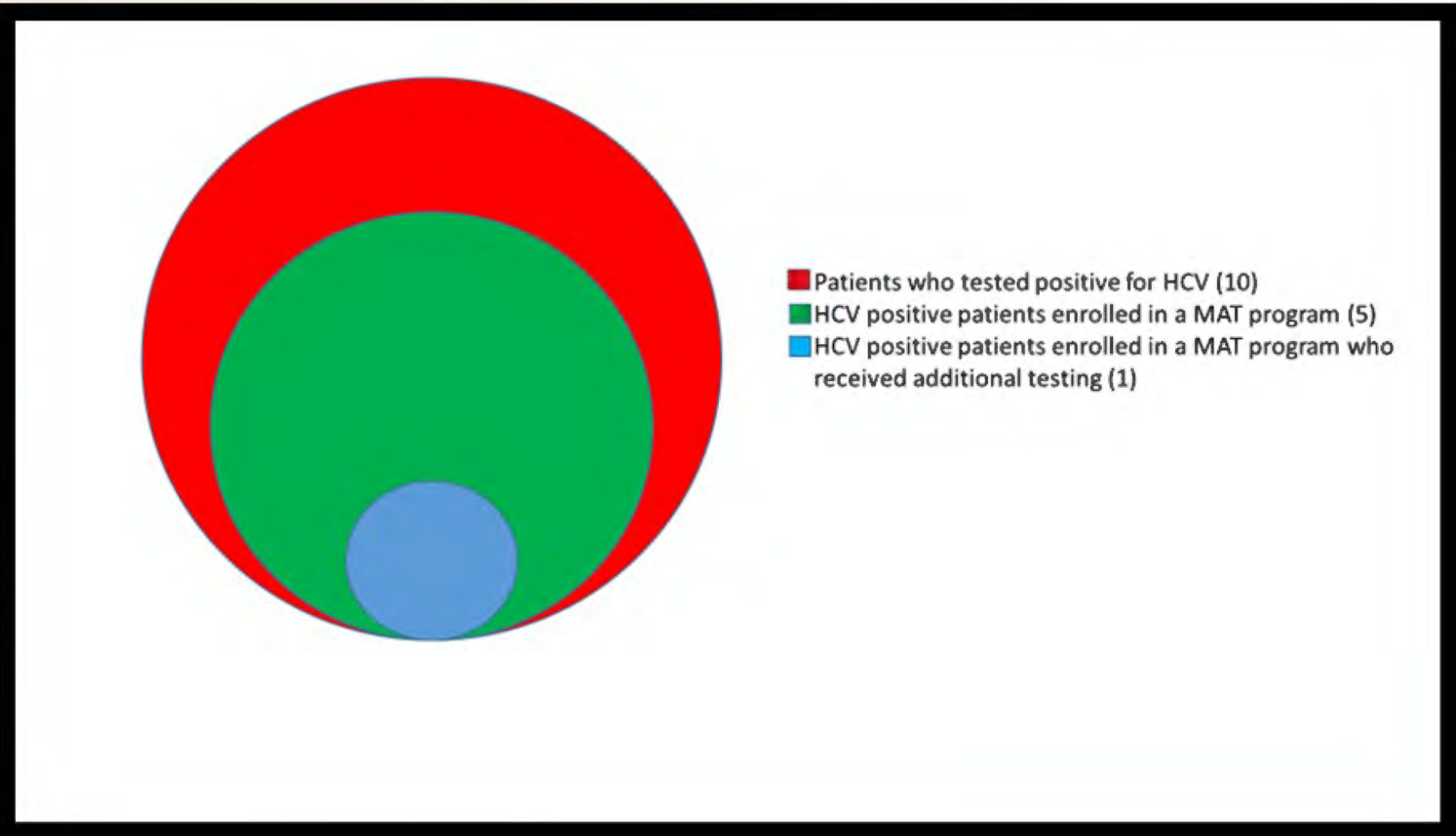


Additional Sources



Audit Results

- According to the audit males completed testing to evaluate hepatic fibrosis and females did not. Further chart evaluation is needed to determine whether females were offered hepatic fibrosis testing and turned it down or whether it was not offered.
- According to the audit, of the 5 patients that received treatment for HCV, 3 were male and 2 were female
- According to the audit, of the 5 patients that were enrolled in a MAT program, only 1 received additional periodic HCV testing.



Barriers to Hepatitis C Testing and Treatment

Provider Education

- A study completed by Flores et al. (2022), shows increased confidence in HCV screening and treatment with appropriate education.
- Dale et al (2022), recommends appointing a provider to receive additional training and oversee responsibility for treatment of HCV.

Cost of Treatment

- Federal program 340B allows for FQHC to provide treatment for HCV at reduced/no cost to qualified individuals (Klein et al., 2021)

Audit Tool Findings

	P1	P2	P3	P4	P5	P6	P7	P8	P9	P10
Is the patient age 18 or older?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Is the patient age 79 or less?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Is the patient male?	Y	N	N	Y	Y	N	Y	N	N	Y
Is the patient female?	N	Y	Y	N	N	Y	N	Y	Y	N
Did the patient receive education on importance of Hepatitis C testing?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Has the patient been offered Hepatitis C testing?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Did the patient complete Hepatitis C testing?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Did the patient test positive for Hepatitis C?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Did the patient have diagnostic evaluation using one of various noninvasive tests? (ie fibrosure, fibroscan)	N	N	N	Y	Y	N	Y	N	N	N
Did the patient receive treatment for Hepatitis C?	N	Y	N	Y	N	Y	Y	N	N	Y
Is the patient enrolled in a MAT program?	Y	N	Y	Y	N	N	Y	N	N	Y
If the patient is enrolled in a MAT program, did they receive additional periodic Hepatitis C testing?	N	N	N	Y	N	N	N	N	N	N

Management of Hepatitis Screening

Who to Screen for Hepatitis C

- All patients aged 18-79 should be screened for hepatitis C one time.
- If the patient has risk factors for continued or additional exposure the patient should be rescreened periodically.

How to Screen for Hepatitis C

- Laboratory testing includes HCV antibody testing with reflex HCV RNA testing if antibodies are present. (Buttaro et al., 2021)
- Consider genome testing based on the patient's health history if RNA shows active disease to guide treatment options. (Buttaro et al., 2021)
- Other labs to consider: CBC, LFTs, PT, platelets, and albumin. (Buttaro et al., 2021)

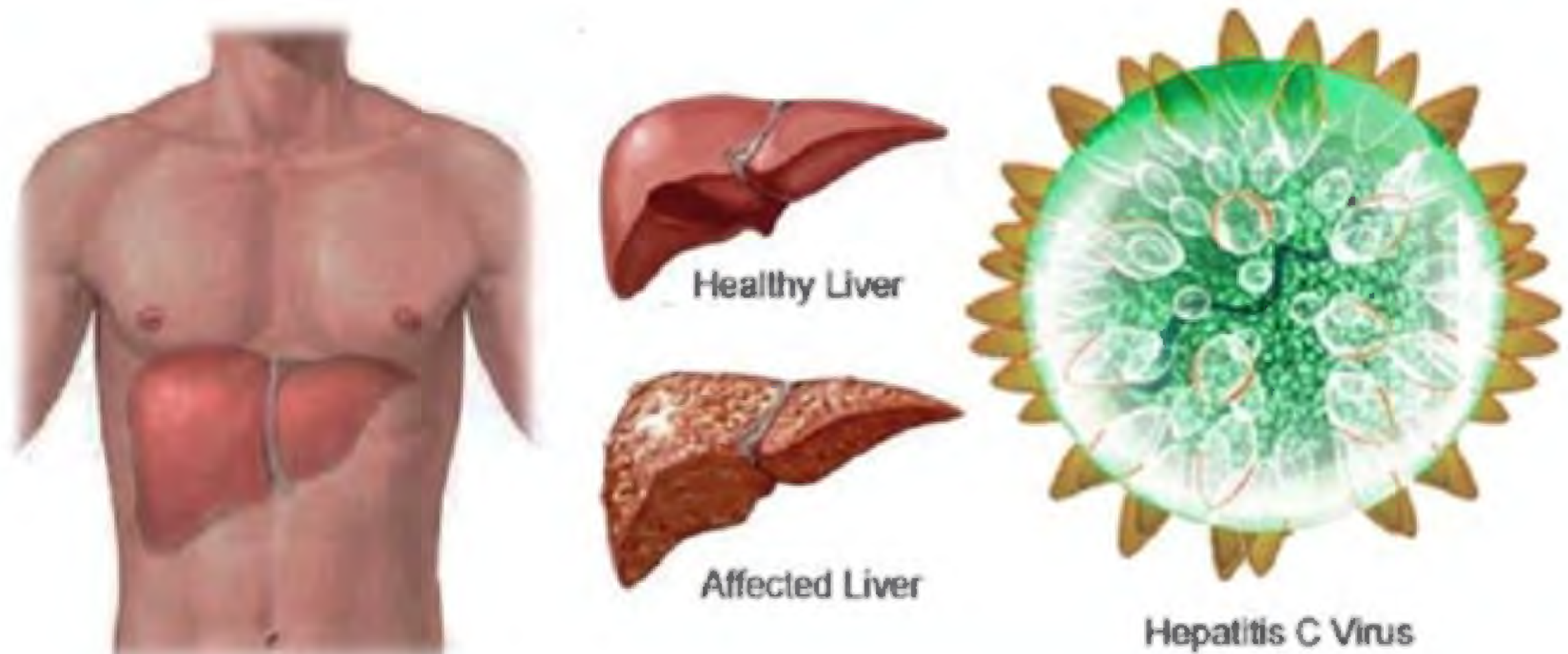
Positive HCV Screening Now What?

If the patient tests positive for a chronic hepatitis C infection the patient should have the following tests ordered:

- Liver Ultrasound(Buttaro et al., 2021)
- Noninvasive liver fibrosis test such as ultrasound-based transient elastography (Buttaro et al., 2021)
- Fibroscan (Buttaro et al., 2021)

Treating Hepatitis C

- Consider referral to hepatologist or gastroenterologist
- Medication regimens include Harvoni, Epclusa, interferon, and ribavirin. (Buttaro et al., 2021)



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