Lost to follow up? Strategies for improving engagement with index cases and contacts within Victoria

Authors:

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Background/Purpose:

Individuals who are lost to follow up (LTFU) for sexually transmitted infections (STIs) and blood-borne viruses (BBVs) of which they are unaware, which remain untreated or who are at-risk contacts of known cases, can pose not only a personal health risk but also a public health risk. The follow-up of such cases is labour intensive and when ongoing engagement fails this can lead to anxiety for health services who often lack the human resources to continue effort.

Approach:

The Victorian Investigation of Complex Sexually transmitted infections (VICS) team are a group of specialist nurses working within Communicable Diseases at the Department of Health, Victoria. The team has considerable experience in sexual health, mental health, youth and drug and alcohol-related issues. Part of the role of VICS is to attempt to locate and re-engage LTFU cases considered to be of significant public health risk. VICS are a point of escalation and referral for health services who have exhausted their ability to follow up a case/s and where such a risk may be present.

Outcomes/Impact:

Referrals commonly include; people unaware of a HIV diagnosis, contacts of a new HIV diagnosis, untreated STI index cases and their contacts, BBV/STIs in pregnancy, drug resistant gonorrhoea and cases with BBVs/STIs with complex comorbidities that require enhanced support to reduce public health risk. A 6-month cohort of referred cases will be presented along with an analysis of the methods used to reach selected cases with rates of success in reengagement in care, testing and treatment pathways. We compare the success rates for different engagement modalities and share commonalities across the demographic spectrum.

Innovation and Significance:

This will promote discussion and provide learnings for services who face similar issues with LTFU cases.

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