



Collaborative HCV Learning Model for Patients and Clinicians in Substance Use Disorder Clinics:

2016-2017 Findings on
Knowledge and Perceptions

**Litwin AH^{1,2}, Martinez A^{3,4,5}, Simone LC⁶, Carter JD⁶,
Greene LS⁶, Sapir T⁶, Moreo KF⁶**

1 Albert Einstein College of Medicine, 2 Montefiore Medical Center, 3 University of Buffalo,
4 Erie County Medical Center, 5 Buffalo General Medical Center, 6 PRIME Education, LLC



Disclosure of Interest

This project was conducted by **PRIME Education, LLC** through independent medical educational grants from Abbvie, Inc. and Gilead Sciences, Inc. The study sponsors did not play a role in the design or analysis of the study or in the decision to submit for presentation.

The Speaker has acted as an advisor, consultant, speaker, and/or has received research grants from the following companies:

Abbvie, Bayer, Bristol-Myers Squibb, Gilead Sciences Inc., Intercept, Merck, Salix, Tobira

Study Objectives



Assess the effectiveness of a collaborative learning model on HCV knowledge and beliefs, among persons with SUD and their counseling teams



Evaluate a proof-of-concept for a sustainable collaborative learning model for HCV across SUD clinics

© 2017 PRIME Education, LLC. All Rights Reserved. **PRIME**[®]

Methodology



Train SUD clinic providers via online HCV expert-guided video tutorials



Support SUD clinic providers with a CME accredited HCV curriculum kit

- Slide deck with comprehensive speaker's notes
- Patient handouts
- Outreach flyers

1.5 hr

Patient educational sessions led by the center's own providers



Patient and provider surveys conducted before and after the patient sessions at each clinic

© 2017 PRIME Education, LLC. All Rights Reserved. **PRIME**[®]

Methodology



35 SUD
centers enrolled across
the United States



Data collected
from **32 clinics** to date
(August 2016-August 2017)



📍 = SUD clinic, client participation

Data collected from 32/35 SUD centers

© 2017 PRIME Education, LLC. All Rights Reserved. **PRIME**

HCV Patient Education Curriculum

- I. What HCV is & how it affects the liver
- II. Who is at risk for HCV
- III. HCV symptoms
- IV. HCV testing
- V. Harm reduction to prevent HCV infection
- VI. Interferon-free treatment options
- VII. Benefits of HCV cure
- VIII. Importance of medication adherence
- IX. Risks of reinfection

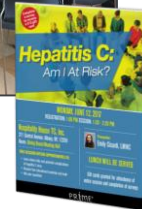


Most People with Hep C Have No Symptoms

- You may not feel different
- Early signs may include:
 - Tiredness
 - Loss of appetite
 - Abdominal pain
 - Joint pain
 - Jaundice (yellowish skin and eyes)

70-80% of people with Hep C do not show any symptoms

If you have Hep C, you may not know it because you may not feel sick. In fact, 8 out of 10 people don't know they have the virus. If someone does have symptoms, they might be extreme tiredness, fatigue, body pain, weakness, or loss of appetite. Other possible symptoms are pain or muscle aches, and yellowing of the skin and eyes (jaundice).



© 2017 PRIME Education, LLC. All Rights Reserved. **PRIME**

Provider Characteristics & Clinic Services



Provider Characteristics (N = 85)		Clinic Services Provided (N = 32)	
Years in Practice	11 years	Service, n (%)	
Discipline	68% Counselor 19% Social worker 8% Nurse 4% Psychologist/Physician	Anti-HCV antibody testing	9 (28%)
Gender	76% Female	HCV viral load testing	8 (25%)
		Referrals to a HCV specialist	25 (78%)
		Alcohol screening and intervention	29 (91%)
		Mental health services	28 (88%)

© 2017 PRIME Education, LLC. All Rights Reserved. 

Patient Participants

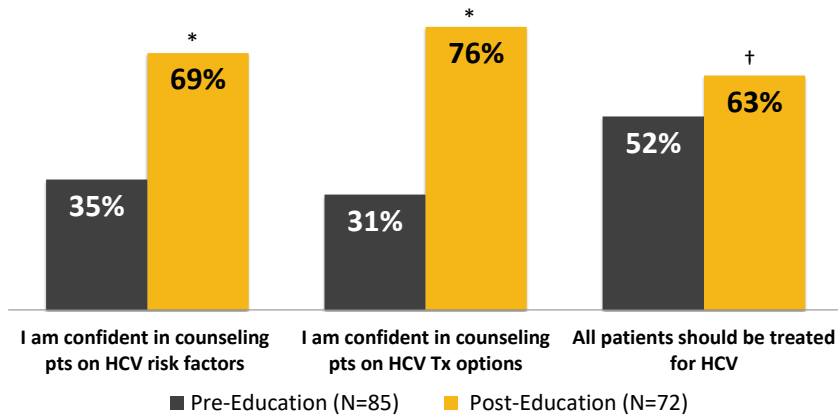


Patient Self-Reported Demographics (N = 631)	
Average Age	39 years old (median = 37 yrs)
Sex	47% Female 1% Transgender
Race	59% Caucasian 25% African American 1% Asian 15% Other/Unknown
Ethnicity	12% Hispanic/Latino
Injection Drug Use (Ever)	48%
Tested for HCV in Last Year	45%
Tested for HCV > 1 Year Ago	20%

© 2017 PRIME Education, LLC. All Rights Reserved. 

Provider Confidence in HCV Counseling & Beliefs Regarding HCV Treatment in Persons with SUD

% SUD Providers Who Strongly Agree

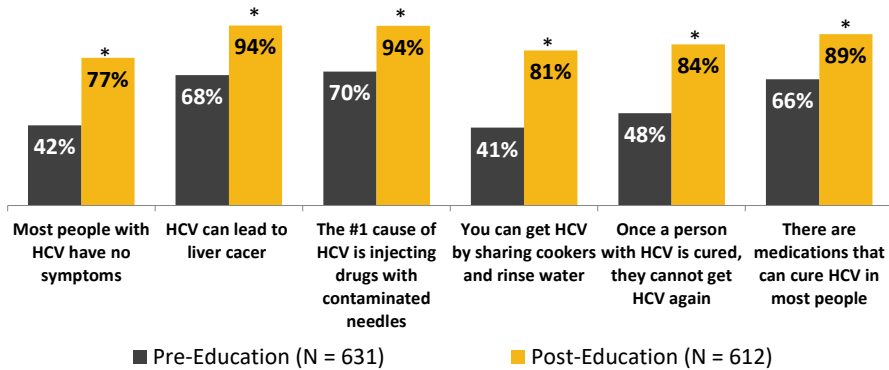


* P<0.001 † P=0.121
Agreement assessed on a 5-point Likert scale

© 2017 PRIME Education, LLC. All Rights Reserved. **PRIME**

Knowledge & Beliefs Among SUD Patients: HCV Transmission & Risks

% Patients with Correct Responses to True/False Questions



On average, patients correctly answered 44% of 11 HCV knowledge-based questions at baseline (median 42%; 15%-70%), and 73% (median 79%; 34%-94%) post-education (p<0.001)

* P<0.001

© 2017 PRIME Education, LLC. All Rights Reserved. **PRIME**

SUD Patients Perceptions of HCV Risk and Willingness to Get Tested

Pre-education (N=631)

26% of patients believe they are at risk for HCV

Post-education (N=612)

87% of patients in attendance were willing/very willing to get tested for HCV after the program

Reasons Patients Report for Not Getting Tested

51% Believe they have already been tested for HCV

22% Do not know where to go to get tested

17% Do not feel the need to get tested

4% Too scared or nervous to get tested

3% No transportation to a testing clinic

2% Concerned being judged

2% Do not want to know if have the disease



© 2017 PRIME Education, LLC. All Rights Reserved. **PRIME**

Conclusions & Next Steps



Collaborative education across SUD clinics improves:

- Confidence in HCV counseling among providers
- HCV knowledge among persons with SUD
- Patient motivation to get tested for HCV



Proof of concept study presents a scalable model across SUD clinics



Future studies to examine:

- Educational interventions supporting clinics in linking patients to care
- Long-term impact on HCV testing rates

© 2017 PRIME Education, LLC. All Rights Reserved. **PRIME**