

Hepatitis screening in drug, alcohol and mental health services in Shepparton, rural Victoria

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Background/Approach: Hepatitis C causes significant morbidity and mortality, particularly in drug, alcohol and mental health service populations. Screening remains suboptimal in these settings, particularly in regional areas. According to modelled estimates, Shepparton has the highest hepatitis C prevalence in regional Victoria, and nearly the lowest treatment rates.

Analysis/Argument: A large proportion of undiagnosed people with hepatitis C in the Goulburn Valley region live in Shepparton, and a large proportion of these likely attend drug, alcohol or mental health services. We implemented an intervention to improve hepatitis C screening at the central service for these patients in Shepparton, the Goulburn Valley Health (GVH) Joint Addiction Medicine and Mental Health Service. This included clinical guidelines promoting universal screening, intensive staff education, integrated screening prompts, advocacy from service leaders, and a streamlined referral process to the local Nurse Practitioner-led hepatitis clinic.

Outcome/Results: We audited screening rates at the GVH mental health inpatient service and drug and alcohol outpatient service before and after the intervention. 404 patients were included over 9 months. Hepatitis C screening rates increased significantly from 6.6% pre-intervention to 27.9% post-intervention. Antibody-positive patients were referred to the hepatitis Nurse Practitioner for assessment and treatment.

Conclusions/Applications: This was a pragmatic audit of an intervention, and its limitations must be considered. However, the evidence suggests that the intervention was effective in increasing screening rates. Significant work remains to ensure the intervention is sustainable, grows to become more universal, and achieves successful follow-through of antibody-positive patients through to treatment and cure.

We are now expanding the program to include Shepparton's major needle syringe exchange program, and partnering with research organisations. Our strategy will be to combine three initiatives: 1) Universal screening, 2) Point-of-care hepatitis C testing, and 3) Financial incentives. We believe this strategy will further improve screening rates and follow-through to care and cure.

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