

# A QUALITATIVE EXPLORATION OF ENABLERS TO HEPATITIS B CLINICAL MANAGEMENT AMONG ETHNIC CHINESE IN AUSTRALIA

## Authors:

Xiao Y<sup>1,2,3</sup>, Wallace J<sup>1,4</sup>, Thompson A<sup>2,3</sup>, Hellard M<sup>1,3,5,6,7</sup>, van Gemert C<sup>1,3</sup>, Howell J<sup>1,2,3,5</sup>

1. Burnet Institute, Melbourne 3004, Victoria, Australia
2. Department of Gastroenterology, St Vincent's Hospital, Fitzroy 3065, Victoria, Australia
3. University of Melbourne, Parkville 3010, Victoria, Australia
4. La Trobe University, Bundoora 3086, Victoria, Australia
5. School of Public Health and Preventive Medicine, Monash University, Melbourne 3004, Victoria, Australia
6. Department of Infectious Diseases, The Alfred and Monash University, Melbourne 3004, Victoria, Australia
7. The Peter Doherty Institute for Infection and Immunity, Melbourne 3000, Victoria, Australia.

**Background:** An estimated 18% of people living with chronic hepatitis B (CHB) in Australia were born in China. While guideline-based care, including regular clinical monitoring and timely treatment prevent CHB-related cirrhosis, cancer and deaths, over three-quarters of people with CHB do not participate in guideline-based care in Australia. This qualitative study aimed to identify enablers to engagement in CHB clinical management among ethnic Chinese people attending a specialist service.

**Methods:** Participants self-identified as of Chinese ethnicity and who attended specialist care for CHB clinical management were interviewed in Melbourne in 2019 (n=30). Semi-structured interviews covered experiences of diagnosis and engagement in clinical management services, and advice for people living with CHB. Electronically recorded interviews were recorded with consent; data were transcribed verbatim, translated and thematically analysed.

**Results:** Receiving clear comprehensible information about the availability of treatment and/or the necessity of long-term clinical management were the main enablers for participants to engage in CHB clinical management. Additional enablers identified to maintain regular clinical monitoring included understanding that CHB increases risk of cirrhosis and liver cancer, using viral load indicators to visualise and conceptualise disease status in patient-doctor communication; expectations from family, peer group and medical professionals of the need to be clinically managed; use of a patient recall system; availability of interpreters or multilingual doctors; and largely subsidised healthcare services.

**Conclusion:** To support people attending clinical management for CHB, a holistic response from community, healthcare providers and the public health sector is required. There are needs for public health programs directed to communicate i) CHB-related complications; ii) availability of effective and cheap treatment; and that iii) long-term engagement with clinical management and its benefits.

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