

Hepatitis C reflex testing in South Australia to improve treatment pathways in hard-to-reach populations

Authors:

Miller T¹, Gillam M¹, Rees T¹, Flood L¹, Johnson D¹, Ferguson B¹, Rogers T¹, Banker T², Ryan R², Zhang F², Riddle C², McKessar S², Penglis D², Stewart J³, Burt C³, Riley N³, Warner MS²

¹Communicable Disease Control Branch, SA Health

²SA Pathology, SA Health

³Central Adelaide Local Health Network, SA Health

Background/Approach:

The current standard of care for hepatitis C virus (HCV) infection in Australia requires multiple visits to a health service for testing before treatment can commence. After an initial positive HCV antibody test, another blood test for HCV RNA is required to confirm a current infection, disadvantaging people who are less engaged in healthcare. To address this, SA Pathology began reflex testing in June 2024, whereby any sample positive or indeterminate for HCV antibodies was automatically tested for RNA.

Analysis/Argument:

This study will analyse the impact that reflex testing has had on rates of HCV testing, diagnosis and treatment commencement in South Australia. It will use linked data (SA Pathology tests and the SA Health Viral Hepatitis Nurse treatment database). It will compare pre and post reflex testing (June 2023 to June 2024, with June 2024 to June 2025) for changes in numbers of RNA tests and diagnoses, proportion and timeliness of patients with RNA-positive HCV commencing treatment, and reduction in repeated antibody testing before a diagnosis. Results will be analysed by subgroups, where possible, including priority populations such as rural/remote areas and Aboriginal and Torres Strait Islander people. A simple cost-benefit analysis will be performed, based on prior modelling of South Australian HCV models of care.

Outcome/Results:

Data is yet to be obtained, pending ethics processes, but results are expected by the time of the conference.

Conclusions/Applications:

This project aims to demonstrate the impact of reflex testing on HCV diagnosis and treatment commencement, including in priority populations. Evidence from these analyses may be used to inform adoption of HCV reflex testing by pathology services in other states and territories and internationally, contributing to elimination goals for HCV.

Disclosure of Interest Statement:

The authors declare that they have no actual or perceived conflicts of interest, and there has been no material or financial contribution by industry to this project.