

BARRIERS AND OPPORTUNITIES TO INCREASE THE ROLE OF GPs IN HEPATITIS B DIAGNOSIS, TREATMENT AND MANAGEMENT: A NATIONWIDE SURVEY OF GENERAL PRACTITIONERS IN AUSTRALIA

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Background: In Australia, only 17% of people living with chronic hepatitis B (CHB) are engaged in care with CHB management still highly centralised in tertiary care. GPs are central to meet national targets of 50% of people with CHB engaged in care, and 20% receiving treatment. We conducted a nationwide GP survey to assess structural barriers and potential opportunities to manage and treat CHB by GPs in Australia.

Methods: A random sample of 1,000 GPs were invited to complete a 21-item questionnaire by postal or online survey. The questionnaire assessed CHB-related knowledge, professional identity and confidence in providing CHB care, and self-reported barriers and facilitators.

Results: Of 962 eligible GPs surveyed in April-October 2018, 134 (14%) responses were received. GPs had high knowledge on identifying at-risk populations (72%) and interpreting CHB serology (82%), but not the timing of treatment initiation (21%). 60% of GPs were unaware that CHB treatment could be dispensed in the community with 73% of GPs stating that prescribing CHB treatment was not part of their work. Clear guidelines (72%), continued medical education (71%), online resources (40%), and educational resources for patients (37%) were the most frequently identified facilitators for CHB management.

Conclusion: A lack of awareness of the role of GPs in monitoring and treating CHB is a major barrier to management in primary care. GPs need to understand that they have a significant role on engaging people with CHB in clinical management. Linking CHB management guidelines and resources to GPs practice is key to support GPs providing ongoing CHB care. A systematic approach to normalise decentralised CHB care is needed to achieve the national targets of eliminating CHB as a major public health threat.

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