Hepatitis C treatment in the virtual world

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Background/Approach: An Australian metropolitan hospital liver clinic led, community focused, Hepatitis C (HCV) treatment service, implemented a virtual model of care in 2016 which expanded during the COVID pandemic. The virtual service encompasses use of telehealth and care provision via a range of clinical and non-clinical partners. Since 2018, treatment uptake via the virtual service has grown from 14% to 71%. This adaptive service consisted of four days/week Nurse Practitioner and two days/week Clinical Nurse Consultant.

Analysis/Argument: A service audit was completed on referrals received during the period between August 2023 and February 2024. The audit explored treatment uptake rates, and times taken to treatment commencement, in those provided care in virtual models compared with the face to face (F2F) service. The audit also noted any key treatment initiation enablers and barriers.

Outcome/Results: There were 119 referrals received for treatment, with a 67% overall treatment uptake rate at the six-month mark (57% virtual, 81% F2F). Average time from referral received to treatment commencement was 48% within one week (54% virtual, 39% F2F) and 87% within one month (90% virtual, 83% F2F). Treatment enablers included, in no order, access to grocery vouchers as incentives, medication delivery service, access to HealtheNet portal (to identify existing client health connections via PBS and MBS data), prescription co-payment coverage and close collaboration with pharmacy and NSW Justice Health and Forensic Mental Health Network clinicians (JHFMHN). 33% of referred clients (43% virtual,17% F2F) did not commence treatment within the six-month period, with barriers identified including pregnancy, palliation, being unable to establish or maintain contact or complete pre-treatment basic safety checks.

Conclusions/Applications: Virtual care models demonstrate the potential to effectively commence HCV treatment within comparable time frames to traditional F2F models, offering a promising option for service consideration.