

HBV – Humans Before Virus.

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Brisbane South Primary Health Network (BSPHN) is home to 1.2 million people (23.2% of Queensland's population) with 31.1% born overseas, 20.2% born in non-English speaking countries. In Australia hepatitis B virus (HBV) significantly affects people from culturally and linguistically diverse (CALD) backgrounds. The Ethnic Communities Council of Queensland's (ECCQ) Hepatitis, HIV and Sexual Health Program primarily engages with overseas trained/CALD general practitioners (GP) to promote screening, management and monitoring of HBV in the BSPHN.

BSPHN has 332 General Practices with over 2000 medical practitioners. Between 2017 and 2022 ECCQ received 2294 Fibroscan referrals for patients with HBV from 106 different GPs from 50 Practices in BSPHN. Forest Lake Oxley, Sunnybank and Nathan SA3 areas have higher affected population numbers with the level of engagement in care increasing (National Viral Hepatitis Mapping Project Reports), with Forest Lake –Oxley increasing from 25.5% in 2016 to 56.2% in 2020, Sunnybank 16.6% to 34.5%, and Nathan 20.4% to 45.6%. Our Program has identified most patients referred for Fibroscan are managed by a GP who speaks their language, with some patients travelling significant distances for their care. 71 patients were identified as receiving care/treatment overseas including Taiwan, China and Vietnam; and 27 people were Medicare Ineligible.

All GPs can manage HBV but many CALD people seek care from GPs who not only share their language but their cultural backgrounds. This supports compliance and understanding of management and monitoring but also potentially reduces stigma and discrimination associated with this disease. Overall, the level of engagement in care between 2016 and 2020 has increased in the BSPHN from 12.8% to 30.7%. Our Program aims to continue supporting these affected communities and their GPs to assist in reaching the goal of 50% engagement in care within the BSPHN.

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