

Understanding Patient Perceptions and Risk for Hepatitis C Screening

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Introduction

- HCV infections are a significant burden on individual and community health
- CDC reported
 - Approximately 17,000 new HCV infections in 2010
 - 3.2 million people living with HCV in US
 - 45% to 85% of viral hepatitis C infections go undiagnosed even though testing is available
- The Baby Boomer (1945-1965) generation and underserved populations continue to carry the brunt of diagnosed and undiagnosed HCV infections

Purpose and Aims

Overall project objectives are to:

- 1) Examine the reasons that adults do not want to test for HCV infections
- 2) To increase awareness of risk factors and infection

The specific aims are to:

- 1) Identify specific themes and barriers to Hepatitis C testing
- 2) Determine if testing rates increase when patients self-identify their risk factors and are offered testing.

Methods

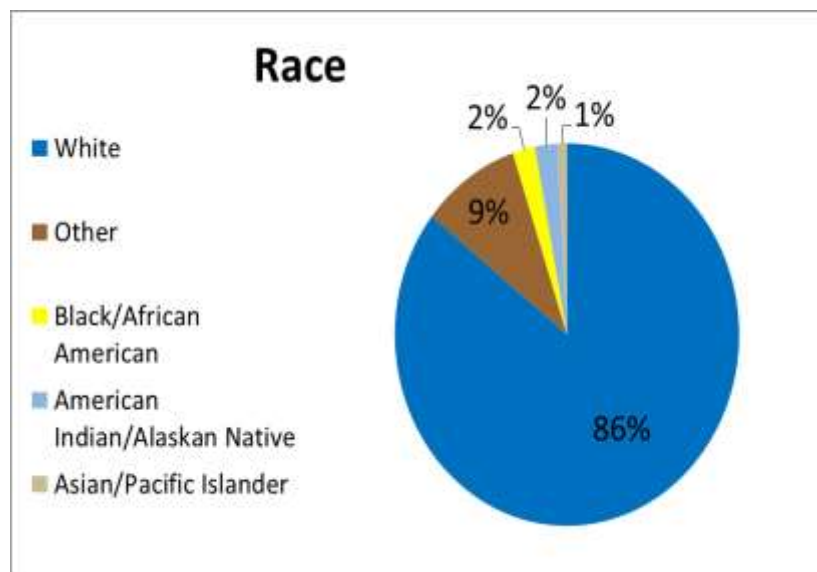
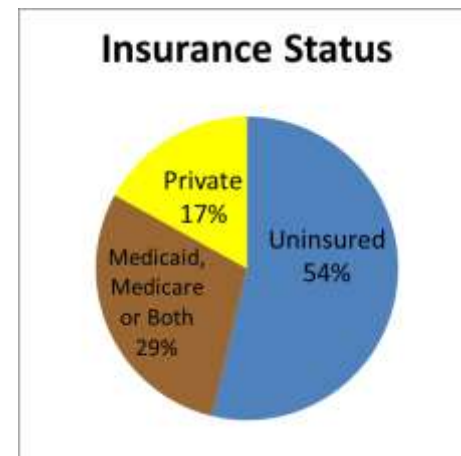
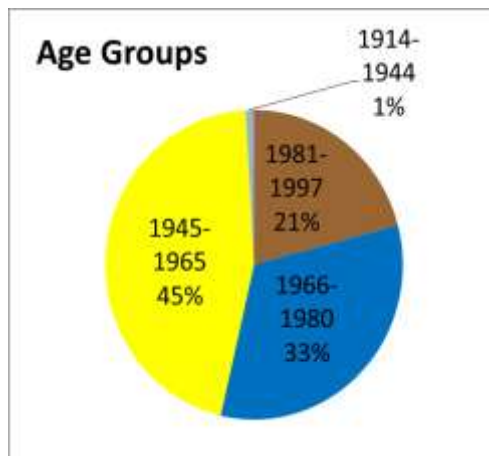
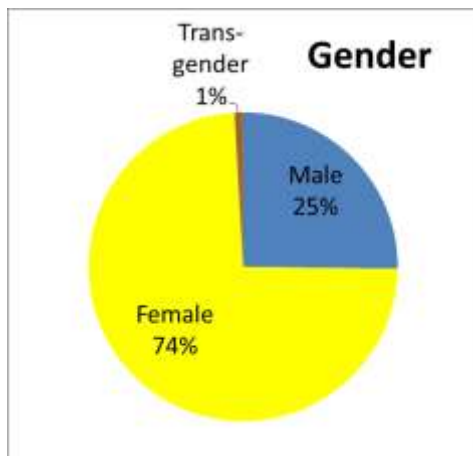
- Descriptive study
 - Survey and group-level electronic health record (EHR) data.
- Survey Assessment 01/09/15-03/20/15
- Survey inclusion criteria
 - Adults (18 years old and older) that speak and write in English or Spanish arriving for care at a FQHC in the Mountain West

Procedures

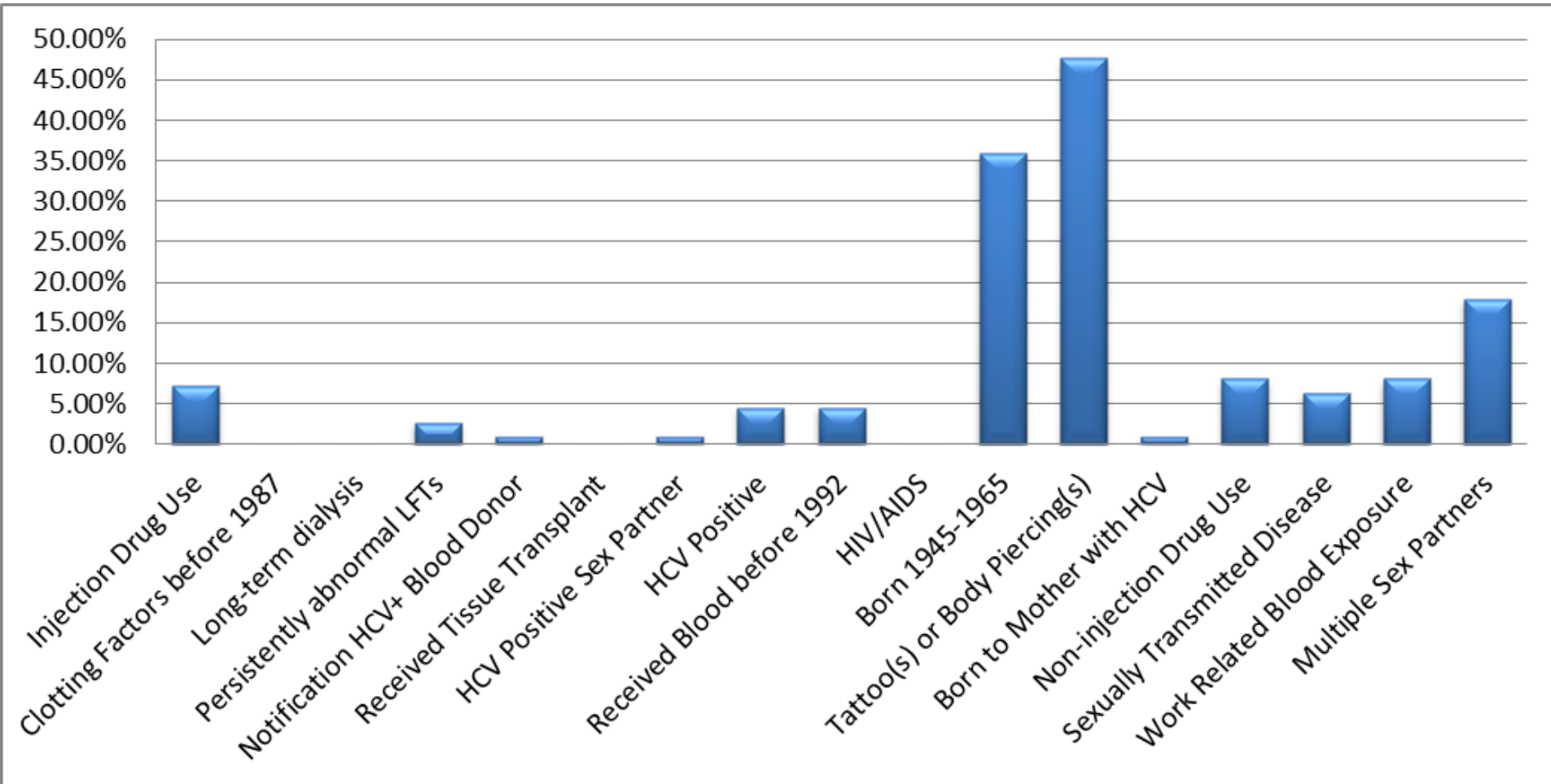
- Human Subject Committee approval from the University of Wyoming Institutional Review Board (UW IRB)
- One paragraph script used by FQHC staff to offer surveys to all adult patients that could read English or Spanish at the time of check-in
- Cover letter explaining the project attached to survey
- Complete and incomplete surveys were placed in an envelope in the exam room by the patient for confidentiality
- A slip of paper requesting HCV testing was attached to each survey
- Questionnaire took 10-15 minutes to complete

Participant Characteristics

N=111, 3% of FQHC patient panel completed surveys



Frequency of Self-identified Risk



Self-identified Risk Factors

- Participants that identified as being born 1945-1965, only 78% identified being born 1945-1965 as a risk factor
- Those that identified as ever using injection drugs, 62.5% belong to the Baby Boomer (1945-1965) age group
- Those that identified a previous diagnosis of HCV, 60% belong to the Baby Boomer age group and 40% to 1966-1980 age group

Intent to Test

- Of those that answered, 81% of participants did not want to test for HCV
- 2% indicated that they would have asked to test despite the survey
- Of participants that indicated a risk of born 1945-1965, 15.8% intended to test for HCV
- Of those that indicated injection drug use, 28.6% intended to test
- 35% of those with a risk of multiple sex partners intended to test

Intent to Test

- Of those that indicated non-injection drug use as a risk factor, 11.1% intended to test
- 19.6% of those with tattoos or body piercings intended to test
- 2.9 tests per week were done in 2014
- 2.1 tests per week were done during 10 week survey period

Main Reasons Not to Test

- “I do not think I have any risk factors” was the most common with 30.2%
- 17% selected more than one main reason
- 15.1% were concerned with cost
- 15.1% had tested in the past
- 9.3% had other reasons
- 5.8% were not feeling well
- 4.7% did not want a blood draw
- 1.2% were worried the test would be positive
- 1.2% do not feel comfortable being tested at the FQHC
- No one selected “provider did not say I needed it”

Additional Reasons Not to Test

- 18.9% felt they had no risk
- 14.4% had tested in the past
- 9.9% were concerned with cost of testing
- 8.1% listed other reasons
- 6.3% stated the provider did not tell them they needed it
- 6.3% did not feel well
- 3.6% did not want a blood draw
- 2.7% did not feel comfortable being tested at the FQHC
- 0.9% were worried the result would be positive

Discussion

- Baby Boomers fail to identify being born 1945-1965 as a risk factor even after provided with testing recommendations and information about risk
- Significant portion of those in the Baby Boomer generation identified injection drug use, non-injection drug use and/or tattoos and/or body piercings risks

Discussion

- Only a small number of Baby Boomers indicated that s/he would test for HCV that day
- Screening of those born 1945-1965 needs to occur in greater numbers
- A multifaceted approach to make testing commonplace for all Baby Boomers
 - Printed materials in patient areas
 - Providers to discuss screening during an annual well person exam
 - Risk based screening is recommended for all those not in the Baby Boomer generation

Discussion

- Concern with cost
 - Providing information about cost and coverage options
 - Staff should be knowledgeable of insurance coverage and local programs that offer free or reduced testing
- Comfort in testing at the clinic
 - Staff should ensure confidentiality and demonstrate knowledge about HCV, testing and treatment
 - Be non-judgmental and strive to make HCV testing a routine aspect of care to reduce stigma
 - Assessments should be done to identify specific areas of concern for patient comfort and patient suggestions for improvement

Questions

References

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