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Hepatitis C and HIV Screening

Conference Abstract

Hepatitis C and HIV screening

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Background: Chronic hepatitis C virus (HCV) affects more than 3 million people in the United States. Current HCV treatment offers a shorter treatment interval with fewer adverse reactions as well as improved cure rates of 96%. The increasing rates of hepatitis C infections in adults have been accompanied by multifaceted adverse health outcomes. The purpose of this screening program is to identify HCV-infected individuals, which will lead to clinical interventions and treatment that will improve health outcomes compared to no screening.

Methods: The Centers for Disease Control and Prevention guidelines recommend that anyone with risk factors should be screened for HCV infection. In addition, all persons born between 1945 and 1965 should be screened once in their lifetime. Screening at Curtis V. Cooper Primary HealthCare Inc. (CVCPHC) includes individuals 18 and over for HCV and HIV.

Results: CVCPHC's screening program was implemented in January 2016. As of October 1, 2016, 4054 individuals had been screened for HCV with 187 antibody-positive. Of the individuals with positive antibody tests, 179 were RNA tested, and of these, 122 tested positive. Seventy four percent of those with a positive RNA test were linked to care. Eighty five percent of individuals with a positive RNA test were born between 1945 and 1965. The current case reports consist of 57 active HCV patients on medication and/or have completed therapy; 10 have a viral load not detected (ND) > 4-6 weeks after starting medication; 15 completed therapy with a ND viral load resulting in a 100% cure rate; 12 are currently on medication < 4 weeks; 15 were referred to GI; and five deferred treatment.

Conclusions: Screening for HCV and HIV lead to the appropriate interventions and treatments for persons infected, preventing the progression of liver disease and reducing morbidity and possibly mortality.

Key words: hepatitis C virus, hepatitis C screening, HCV antibody

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